

# MIS000010296

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

FILED  
 16 JAN 12 AM 8:40  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

### LLC DISSOLUTION OR WITHDRAWAL SCG ATLAS BELLA TERRA, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	03
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

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Help

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SCG Atlas Bella Terra, L.L.C.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Larysa Castro

(Name of Person)

*Rinaldi Finkelstein - Franklin, LLC*

(Firm/Company)

591 West Putnam Avenue

(Address)

Greenwich, CT 06830

(City/State and Zip Code)

For further information concerning this matter, please call:

Larysa Castro

(Name of Person)

203

422-7779

at ( )

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

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16 JAN 12 AM 8:40

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

SCG Atlas Bella Terra, L.L.C.

\_\_\_\_\_  
(Name of limited liability company)

Delaware

\_\_\_\_\_  
(Jurisdiction of its organization)

12/28/2015

\_\_\_\_\_  
(Date registered with Florida Department of State)

M15000010296

\_\_\_\_\_  
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



\_\_\_\_\_  
(Signature of authorized representative)

Nick Antonopoulos

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**