MINOCOCCESO

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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P # 05

D. BRUCE NOV 30 2016

COVER LETTER

	gistration S vision of Co	ection orporations						
Of the Year		ND ADVANCE FUND	ING II LLC					
SUBJECT:		(Name of Fore	ign Limited Liabi	lity Company)			
Dear Sir or I	Madam:							
		val and fee(s) are submitted	for filing					
The enclosed	u williarav	rai and rec(s) are submined	ior ning.					
Please return	n all corres	pondence concerning this r	natter to the follow	ving:				
MICHAE	L PETR	YCKI						
		(Name of Person)						
LEGENE) ADVAI	NCE FUNDING II LL	С					
		(Firm/Company)						
767 THI	RD AVE	NUE 32ND FLOOR						
		(Address)						
NEW YO	ORK NY	10017				TALL/	2016 NOV 28	****
		(City/State and Zip Code	;)			出る	NON NON	
For further	informatio	n concerning this matter, pl	ease call:			SSEE YRY	28	
		i concerning mis manar, pr				<u>بر در</u>	U	
MICHAE	EL PETR	YCKI	212 at (676-	5550	STA LOR	4.	
	(Nar	ne of Person)		ode & Daytime	Telephone Number)	DE A	05	
Re Di CI 26	egistration ivision of C ifton Build 61 Execut	Corporations	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is	s a check f	or the following amount:				,		
□ \$25 Filit	ng Fee	☐ \$30 Filing Fee & Certificate of Status	Certified Cop	y Ce	0 Filing Fee, rtificate of Status & rtified Copy	•		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LEGEND ADVANCE FUNDING II LLC			
(Name of limited liability company)			
NEW YORK			
(Jurisdiction of its organization)			
DECEMBER 29, 2015			
(Date registered with Florida Department of State)			
M1600000056			
(Florida Document Number)			
This limited liability company is withdrawing its certificate of authority in this state.			
Michael Cely el (Signature of authorized representative) MICHAEL PETRYCKI (Typed or printed name of signes)	SECRETARY OF	2016 NOV 28 1	
(Typed or printed name of signee)	FLOR	. <u>0</u>	

Filing Fee: \$25.00