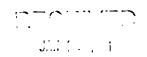
MIL U00000479

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

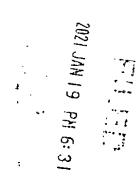
Office Use Only



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MAR 0.1 2021 S. YOUNG

COVER LETTER

TO:	Registration Division of	section Corporations	•	• • • • • • • • • • • • • • • • • • •
SUBJ	ЕСТ:	South Cove Capital LLC		
		(Name of For	eign Limited Liability	Company)
Dear S	Sir or Madam:			
The er	nclosed withdr	awal and fee(s) are submitte	d for filing.	
Please	return all corr	espondence concerning this	matter to the followin	g:
	Robert Logan			_
		(Name of Person)		
	Pelican Capita	al Management LLC		
		(Finn/Company)		_
	28570 Calabri	a Court, Unit 101		
		(Address)		-
	Naples, FL 3	4110		
		(City/State and Zip Cod	e)	_
For fu	irther informati	on concerning this matter, p	lease call:	
^	Amanda Lackey		at (239) 908-0912
	(N	ame of Person)	(Area Code &	& Daytime Telephone Number)
	Division of P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclo	sed is a check	for the following amount:		
⊠ \$2:	5 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

South Cove Capital LLC (Name of limited liability company)
State of Delaware (Jurisdiction of its organization)
January 9, 2016 (Date registered with Florida Department of State)
M1600000479 (Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing: December 31, 2020 (optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
(Signature of authorized representative) ROSOLF F. WAN JR. (Typed or printed name of signee) PR. 60.

Filing Fee: \$25.00