M60000164

;

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phon	ne #)
PICK-JP WAIT	MAIL
(Business Entity Na	me)
(Document Number)
Certified Copies Certificate	es of Status
Special Instructions to Filing Officer	

Office Use Only



200361999722





: 31 H KEF MAR 1 7 2021 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE : 705661 7361206	
AUTHORIZATION :	
COST LIMIT : \$ 25.00	
ORDER DATE: March 15, 2021	
ORDER TIME : 10:58 AM	
ORDER NO. : 705661-010	
CUSTOMER NO: 7361206	
FOREIGN FILINGS NAME: OMNINET FOUR GP LLC	
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS	
CONTACT PERSON: Alexxis Weiland - EXT#	

EXAMINER: ____

COVER LETTER

	ion of Corporations		
SUBJECT: _	Omninet Four GP LLC		
SUBJECT: _	(Name of Fore	ign Limited Liability	Company)
Dear Sir or Ma	ıdam:		
The enclosed v	withdrawal and fee(s) are submitted	for filing.	
Please return a	Il correspondence concerning this n	natter to the following	g:
Vincent Cisne	ros		
	(Name of Person)		-
Omninet Capi	tal, LLC		
	(Firm/Company)		_
9420 Wilshire	Blvd Ste 400		
	(Address)		_
Beverly Hills,	CA 90212		
-	(City/State and Zip Code)	-
For further info	ormation concerning this matter, ple	ease call:	
Vincent Cisne	ros	310 at (300-4151
	(Name of Person)		Daytime Telephone Number)
Regi Divi P.O.	ng Address: stration Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a	check for the following amount:		
□\$25 Filing I	Fee S30 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

mninet Four GP LLC
(Name of limited liability company)
alifornia
(Jurisdiction of its organization)
2/11/2012
(Date registered with Florida Department of State)
116000001641
(Florida Document Number)
ffective Date, if other than the date of filing: f an effective date is listed, the date must be specific and cannot be prior to date of filing or ore than 90 days after filing.) ote: If the date inserted in this block does not meet the applicable statutory filing requirements, is date will not be listed as the document's effective date on the Department of State's records. (Signature of authorized representative)
Neil Kadisha
(Typed or printed name of signee)

Filing Fee: \$25.00