M16000001800

(Requestor's Name)
(Address)
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(1001000)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2023 JAN 13 AM 9: 24

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

_____ CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 352094 7833946	
AUTHORIZATION: millible man	
COST LIMIT : \$ 25.00/	
ORDER DATE : January 13, 2023	
ORDER TIME : 1:11 PM	
ORDER NO. : 352094-005	
CUSTOMER NO: 7833946	
	. – – -
FOREIGN FILINGS	
NAME: M-524 JEFFERSON AM, LLC	
CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	

EXAMINER:

COVER LETTER

TO: Registratio Division of	n Section Corporations		
M-52- SUBJECT:	Jefferson AM, LLC		
SUBJECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdi	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the followin	g:
Camilo Miguel, Jr.			
	(Name of Person)		-
MC Manager, LLC			
	(Firm/Company)		_
2601 S. Bayshore D	Orive, Ste. 850		
	(Address)		_
Miami, FL 33133			
	(City/State and Zip Cod	e)	_
For further informat	ion concerning this matter, p	lease call:	
Carol Nazarkewich		305 at (531-2426
(N	ame of Person)		& Daytime Telephone Number)
Division P.O. Box	ion Section of Corporations		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 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

M-524 Jefferson AM,	LLC			
	(Name of limited liability company)		2	
Delaware		N. S.	ر 230	***;\$=_*
	(Jurisdiction of its organization)	7:		ц <u>ц</u>
March 2, 2016		25	$\overline{\omega}$	
	(Date registered with Florida Department of State)	ć7.	- 13-	11
M16000001800		- ':	••	
	(Florida Document Number)		-5-	
more than 90 days a Note: If the date in:	is listed, the date must be specific and cannot be prior to office filing.) serted in this block does not meet the applicable statutory listed as the document's effective date on the Department	filing requir	ements.	
	Cocusigned by: Cocusigned by:			
Cam:	ilo Miguel, Jr. (Typed or printed name of signee)			

Filing Fee: \$25.00