## M16000003659

(Requestor's Name)
(Address)
(Address)
(ridaress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
openial medianal of thing officer.

Office Use Only



400310979714

03/27/18--01013--013 \*\*30.00



2/20/1000

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

GPD Associates, LLC SUBJECT: (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: Jacqueline Bennett (Name of Person) **GPD** (Firm/Company) 520 S Main St., Ste. 2531 (Address) Akron, OH 44311 (City/State and Zip Code) For further information concerning this matter, please call: Jacqueline Bennett 572-3593 (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$25 Filing Fee ■ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

GPD Associates, LLC
(Name of limited liability company)
Ohio
(Jurisdiction of its organization)
5/4/2016
(Date registered with Florida Department of State)
M16000003659
(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:
(Signature of authorized representative)  Mark S. Salopek
(Typed or printed name of signee)

Filing Fee: \$25.00