

M16000003857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entry Name)

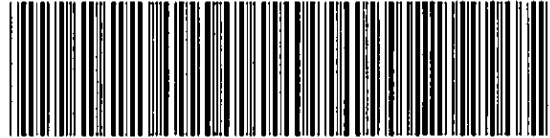
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



800395946868

2022 OCT 13 PM 3:24

LLC

Withdrawal

OCT 14 2022


D CONNELL

FILED
2022 OCT 13 PM 12:45
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 026131 7882647

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : October 13, 2022

ORDER TIME : 2:50 PM

ORDER NO. : 026131-005

CUSTOMER NO: 7882647

FOREIGN FILINGS

NAME: ALLIANCE HSP WEST PALM
WAREHOUSE LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALLIANCE HSP WEST PALM WAREHOUSE LLC

(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:

FRANK ZAZZERA

(Name of Person)

ALLIANCE HP

(Firm/Company)

40 MORRIS AVE, SUITE 230

(Address)

BRYN MAWR, PA 19010

(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK ZAZZERA

(Name of Person)

at (484) 362-2698

(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, 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 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

ALLIANCE HSP WEST PALM WAREHOUSE LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

05/16/2016

05/13/16

(Date registered with Florida Department of State)

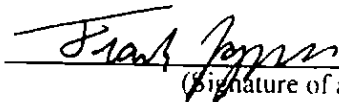
M1600003857

(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: _____ (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)

FRANK ZAZZERA

(Typed or printed name of signee)

FILED
2016 OCT 13 PM 12:45
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00