## MIGOOOOHHHY

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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2019 DEC 30 AM 10: 39
SECRETARY OF STATE
SECRETARY OF STATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 117187 7872561
AUTHORIZATION : Spelle le man
COST LIMIT : \$25.00
ORDER DATE : December 30, 2019
ORDER TIME : 12:40 PM
ORDER NO. : 117187-005
CUSTOMER NO: 7872561
<u>FOREIGN FILINGS</u>
NAME: CORAL REEF DEERFIELD MANAGER, LLC
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Kadesha Roberson - EXT#

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CORAL REEF DEERFIELD MANAGER, LLC	SECRET	2019 DEC
(Name of limited liability company)	<del>- 23</del>	30
Florida	ASSER ASSER	AM 10: 39
(Jurisdiction of its organization)	<del></del>	— 다
July 27, 2016	7	٤
(Date registered with Florida Department of State)		
(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:  [If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing re his date will not be listed as the document's effective date on the Department of States.	optional) filing or equirements	
(Signature of authorized representative)  (Typed or printed name of signee)		

Filing Fee: \$25.00