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COVER LETTER

TO: Registration Division of	n Section Corporations		
HALO SUBJECT:	O Partners, LLC		
SUBJECT.	(Name of For	reign Limited Liability (Company)
Dear Sir or Madam:			
The enclosed withdr	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the following	:
Hal Eason / Ba	rbara Srnorvrsnik		
	(Name of Person)		
HALO Partners	LLC		
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
14835 Ballanty	ne Village Way, Suite	225	
	(Address)		•
Charlotte, NC	28277		
··········	(City/State and Zip Cod	le)	•
For further informat	ion concerning this matter, p	lease call:	
Barbara Srnov	rsnik	704	307-5662
(N	Tame of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		ration Section on of Corporations Box 6327	
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

HALO Partners, ELC
(Name of limited liability company)
North Carolina
(Jurisdiction of its organization)
6/24/16
(Date registered with Florida Department of State)
M1600005131
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
One of the control of
(Typed or printed name of signee)

Filing Fee: \$25.00

16 JUL 22 AHII: 09