## M16000001129

	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
PICK-UF	P WAIT MAIL				
	(Business Entity Name)				
	(Document Number)				
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
<u> </u>					

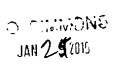
Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 600800 4305845						
AUTHORIZATION :						
COST LIMIT: \$ 15.00						
ORDER DATE : January 24, 2019						
ORDER TIME : 1:10 PM						
ORDER NO. : 600800-050						
CUSTOMER NO: 4305845						
FOREIGN FILINGS						
NAME: GENERATION SRE JACKSONVILLE LLC						
CORPORATE LIMITED PARTNERSHIP 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: Emily Croft - EXT# 62925

## COVER LETTER

FO: Registration Section Division of Corpora					
SUBJECT: Generation SR	E Jacksonville LLC				
	(Name of Foreign	Limited	Liability Company)		
Dear Sir or Madam:					
The enclosed withdrawal ar	nd fee(s) are submitte	ed for fili	ng.		
Please return all correspond	lence concerning this	s matter t	o the following:		
H. Mark Daley. III (Name of Pe	erson)		-		
c/o The Generation Compa (Firm/Comp			-		
4242 Six Forks Road, Suite (Address)	920		-		
Raleigh, North Carolina 27 (City/State a	609 and Zip Code)		-		
For further information con	cerning this matter,	please ca	dl:		
David A. Cook, Vice President		<del></del>	at (919) 313-7230	<del></del>	
(Name of Persor	1)		(Area Code & Da	ylime	Telephone Number)
STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, Florid	n ations nter Circle	Registr Divisio P.O. Be	ING ADDRESS: ation Section on of Corporations ox 6327 assee, Florida 32314		
Enclosed is a check for th	e following amount	::			
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Sta		\$55 Filing Fee & Certified Copy		\$60 Filing Fee. Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Generation SRE Jacksonville LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
<u>Scptember 7, 2016</u>	
(Date registered with Florida Department of State)	
M16000007129	
(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 days after filing.)	ne of filing or more than
Note: If the date inserted in this block does not meet the applicable statutory fi	
will not be listed as the document's effective date on the Department of State's  (Signature of authorized representative)	records.
David A. Cook, Vice President	_
(Typed or printed name of signec)	

Filing Fee: \$25.00

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