

M170000001282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

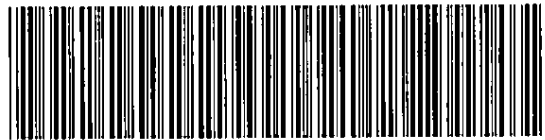
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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RECEIVED

2023 JAN 27 AM 11:57

TALLAHASSEE, FLORIDA

FILED

2023 JAN 27 AM 9:56

SECRETARY OF STATE
TALLAHASSEE, FL



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I200000000088

Date: 01/27/2023

Name: Ken Howell

Reference #: 1889553

Entity Name: PYRAMID HIALEAH MANAGEMENT LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PYRAMID HIALEAH MANAGEMENT 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:

Cindy Warren

(Name of Person)

Pyramid Global Hospitality

(Firm/Company)

30 Rowes Wharf Suite 5300

(Address)

Boston, MA 02110

(City/State and Zip Code)

For further information concerning this matter, please call:

Cindy Warren

(Name of Person)

at (617)

412-2885

(Area Code & 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

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

PYRAMID HIALEAH MANAGEMENT LLC

(Name of limited liability company)

MA

(Jurisdiction of its organization)

09/24/2021

(Date registered with Florida Department of State)

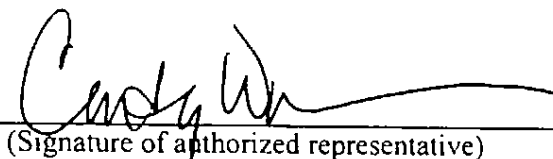
M17000001282

(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)

Cindy Warren

(Typed or printed name of signee)

SECRETARY OF STATE
TALLAHASSEE, FL

2023 JAN 27 AM 9:56

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Filing Fee: \$25.00