Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 : (850)521-0821 Phone Fax Number : (850)558-1515

LLC DISSOLUTION OR WITHDRAWAL VFP ASSET LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu

Help

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COVER LETTER

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etib (1	wr.	VFP As	set LLC			
SUBJE	,C1;		(Name of Foreign Limited Liability Company)			
Dear Si	ir 01 A	ladam				
The end	olosed	withdra	wal and fec(s) are submitte	ed for filing.		
Please	return	all corre	spondence concerning this	matter to the following	¢	
Dillon	Long					
			(Name of Person)			
VFP A	Asset	LLC				
			(Firm/Company)		•	
1 Roc	kef e l	ler Plaza	a, 32nd Floor			
-			(Address)		-	
New `	York.	NY 100	20			
			(City/State and Zip Co	de)	-	
For fur	rther i	nformatio	on concerning this matter,	please call:		
			(D)	at (_) & Daytime Telephone Number)	
		(7/8	me of Person)	(uca couc	E Dayvinic Votepolitico	
	Re Di P.e	vision o O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclo	sed is	a check	for the following amoun	t:		
□\$2:	5 Filir	ig Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	\$60 Filing Fee,Certificate of Status &Certified Copy	

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FP Asset LLC
(Name of limited liability company)
eławare
(Jurisdiction of its organization)
3/10/2017
(Date registered with Florida Department of State)
17000002050
(Florida Document Number)
The second secon
fiective Date, if other than the date of filing:(optional)
f an effective date is listed, the date must be specific and cannot be prior to date of filing or ore than 90 days after filing.)
ote: If the date inserted in this block does not meet the applicable statutory filing requirements,
is date will not be listed as the document's effective date on the Department of State's records.
Duch
(Signature of authorized representative)
Drew Phillips
(Typed or printed name of signee)

Filing Fee: \$25.00