

M1700000 2657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies



Certificates of Status



Special Instructions to Filing Officer:

Office Use Only



500325122095

02/25/13--01008--029 **60

S TALLENT

MAR 05 2019

FILED
19 FEB 25 AM 12:56

notice of
with cert Authority

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEOCO, 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:

Maurice Arcadier, Esq.

(Name of Person)

Arcadier, Biggie and Wood, PLLC

(Firm/Company)

2815 W. New Haven, 304

(Address)

Melbourne, Florida 32904

(City/State and Zip Code)

For further information concerning this matter, please call:

Maurice Arcadier

(Name of Person)

321

953-5998

at ()

(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

NEOCO, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

March 27, 2017

(Date registered with Florida Department of State)

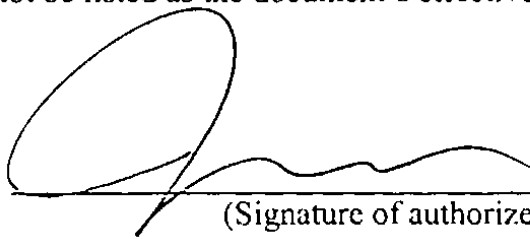
M17000002657

(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: February 18, 2019 (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)

Joseph Munden

(Typed or printed name of signee)

FILED
19 FEB 25 AM 12:56
CLERK OF THE COURT
JACKSONVILLE, FLORIDA

Filing Fee: \$25.00