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A. RIVERS MAR - 9 2023

COVER LETTER

	gistration vision of C	Section Corporations		
SUBJECT:		(FOUNTAINS OUTF	PARCEL LLC	
50501.		(Name of Fore	eign Limited Liability (Company)
Dear Sir or	Madam:			
The enclose	d withdra	wal and fee(s) are submitted	I for filing.	
Please return	n all corre	spondence concerning this	matter to the following:	:
Anjali Ph	narsi			
		(Name of Person)		
C/O DRA	A Advis	ors LLC		
		(Firm/Company)		•
575 5th	Ave, 38	TH FL		
		(Address)		-
New Yor	rk, NY 1	0017		
·		(City/State and Zip Cod	e)	-
For further	informatio	on concerning this matter, p	lease call:	
Anjali Pharsi		212 at (697-4740	
	(Na	me of Person)	(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	s a check	for the following amount:		
☑ \$25 Filir	ng Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

G&I IX FOUNTAINS OUTPARCEL LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
05/10/2017
(Date registered with Florida Department of State)
M17000003990
(Florida Document Number)
(Florida Document Number) This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
Jason Borreo
(Typed or printed name of signee)

Filing Fee: \$25.00