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COVER LETTER

	tegistration Sectio Division of Corpor			
SUBJEC'	ACC of Tama	rac, LLC		
St. BSTAC	· ·	(Name of Fo	reign Limited Liability	Company)
Dear Sir o	r Madam;			
The enclos	sed withdrawal an	I fee(s) are submitte	ed for filing.	
Please rett	ırıı all corresponde	ence concerning this	matter to the following	3:
Philip J. K	antor			
	G	Vame of Person)		-
Quintarios	s, Prieto, Wood &	Boyer, P.A.		
	(1)	im√Company)		-
ONe East	Broward Blvd, St	ite 1200,		
	(1	Address)		-
Ft. Lauder	dlae, FL 33301			
 -	((City/State and Zip Coo	le)	-
For further	information conc	eming this matter, p	fease call:	
Philip J. K	antor		954 at (523-7008
	(Name of Po	erson)	(Area Code &	Daytime Telephone Number)
STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		
T	561 Executive Cer allahassee, Florida s a check for the		Tallah	iassee, Florida 32314
■ \$25 Fili	ng Pee 🔲 \$30	Filing Fee & ertificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Conv.

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ACC of Tamarac, LLC	F. Comments
(Name of limited liability company)	THE THE
Delaware	· · · · · · · · · · · · · · · · · · ·
(Jurisdiction of its organization)	
May 10, 2017	
(Date registered with Florida Department of S	State)
M17000004059	₹
(Florida Document Number)	
Effective Date, if other than the date of filing: Hogost 15, 20 (If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable this date will not be listed as the document's effective date on the D (Signature of authorized representative) Joseph Canavan	c prior to date of filing or statutory filing requirements, Department of State's records.
(Typed or printed name of signee))

Filing Fee: \$25.00