

M17 000006389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

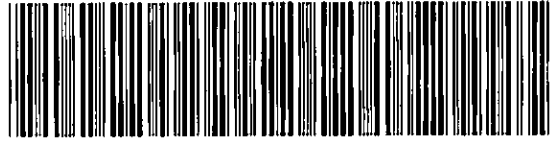
(Business Entity Name)

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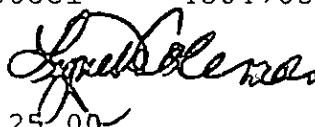
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APR 02 2018

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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 136881 4804708
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : March 28, 2018
ORDER TIME : 2:34 PM
ORDER NO. : 136881-015
CUSTOMER NO: 4804708

FOREIGN FILINGS

NAME: RIDGEBACK ASSET MANAGEMENT GP
LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

RIDGEBACK ASSET MANAGEMENT GP LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

07/27/2017

(Date registered with Florida Department of State)

M17000006389

(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)

Wayne Holman, Managing Member

(Typed or printed name of signer)

Filing Fee: \$25.00

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