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

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CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Robinson - EXT# 62968

EXAMINER:

ACCOUNT NO. : I2000000195 REFERENCE : 075730 AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: December 4, 2019 ORDER TIME : 9:51 AM ORDER NO. : 075730-005 CUSTOMER NO: 4320946 FOREIGN FILINGS NAME: 4523 NORTH PINE HILLS ROAD HOLDINGS, LLC ___ CORPORATE _ LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

4523 North P	ine Hills Road Holdings, LLC			
	(Name of limited liability company)			
Maryland				
 -	(Jurisdiction of its organization)		· · · · · · ·	
08/02/2017				
	(Date registered with Florida Department of State)			
M1700000654	43			
-	(Florida Document Number)			<u> </u>
This limited	I liability company is withdrawing its certificate of authority in t	this sta	te.	
(If an effecti more than 9 Note: If the	ate, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to days after filing.) date inserted in this block does not meet the applicable statutor ll not be listed as the document's effective date on the Department (Signature of authorized representative)	y filing	g requi	g or rements,
	Megan Weaver, Authorized Representative	Mile.	W.A	
	(Typed or printed name of signee)	ch Addition to their	DEC -5 A 4 2	T

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