

M17000006723

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

AUG 10 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2018

TAMPA FLEX 5, LLC
AVISTONE, LLC
28202 CABOT RD, STE. 210
LAGUNA NIGUEL, CA 92677

SUBJECT: TAMPA FLEX 5, LLC
Ref. Number: M17000006723

Upon receipt of your letter and/or check(s) totaling \$25.00, no document was found. Please send your document with any fees due to:

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 318A00014750



RECEIVED

2018 AUG -3 AM 10:05

REGISTRATION
DIVISION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tampa Flex 5, 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:

Suzanne Skov

(Name of Person)

Avistone, LLC

(Firm/Company)

28202 Cabot Road, Suite 210

(Address)

Laguna Niguel, CA 92677

(City/State and Zip Code)

For further information concerning this matter, please call:

Suzanne Skov

949

682-7200

at (_____) _____

(Name 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 a check for the following amount:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

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18 AUG -3 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Tampa Flex 5, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

August 7, 2017

(Date registered with Florida Department of State)

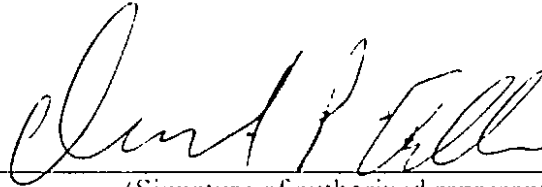
M17000006723

(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: May 8, 2018 (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)

Daniel P. Culler

DANIEL P. CULLER
(Typed or printed name of signee)

Filing Fee: \$25.00