4170000000849

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900342964439

SECRETARY OF STATE ALLAHASSEELFLORIDA

2828 APR 10 AH 8: 38

2020 KFR TO PH 2: 0

APR 13 2020



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088 April 10, 2020 Date: **KEN HOWELL** Name:_ 1208295 Reference #:____ **OPENDOOR PROPERTY W16 LLC** Entity Name:_____ Articles of Incorporation/Authorization to Transact Business Amendment ☐ Change of Agent **ISSUES? CALL** Reinstatement KEN: 518-213-0738 Conversion Merger ✓ Dissolution/Withdrawal Fictitious Name Other Authorized Amount: \$25.00 Signature:



April 10, 2020

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: April 10	, 2020		
Name: KEN HO	OWELL		
Reference #:	1208295		
Entity Name:	OPENDO	OR PROPE	RTY W16 LLC
Articles of Incorpo	oration/Authoriza	tion to Transa	ct Business
Amendment			
☐ Change of Agent			ISSUES? CALL
Reinstatement		KEN:	
Conversion			518-213-0738
☐ Merger			
✓ Dissolution/Withd	rawal		
☐ Fictitious Name			
Other			
Authorized Amount:	\$25.00		
Signature:			_

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Opendoor Property W16 LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
08/10/2017	
(Date registered with Florida Department of State)	
M17000006849	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in thi	is state.
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory this date will not be listed as the document's effective date on the Department.	filing requirements,
	3 2
(Signature of authorized representative)	BEB APR 10
Elizabeth Stevens	ASS ASS
(Typed or printed name of signee)	AH 8: 32

Filing Fee: \$25.00