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COVER LETTĘR

TO: Registratio Division of	n Section Corporations		<i>;</i>		
	EVENTEEN, LLC				
SUBJECT:	(Name of For	eign Limited Liability	Company)		
Dear Sir or Madam:					
The enclosed withdo	rawal and fee(s) are submitte	d for filing.			
Please return all cor	respondence concerning this	matter to the followin	g:		
Michael Ziegler					
	(Name of Person)	 -	_		
Ameritel					
<u></u>	(Firm/Company)		_		
254 47th St					
	(Address)		_		
Brooklyn, NY 1122	20				
	(City/State and Zip Cod	e)	_		
For further informat	ion concerning this matter, p	lease call:			~>
Michael Ziegler		718 at (826-1111	<u> </u>	
(2)	fame of Person)		& Daytime Telephone Number)		2021 F.&.? 2r
Division P.O. Box	ion Section of Corporations		Street Address: Registration Section Division of Corporation The Centre of Tallahass 2415 N. Monroe Street, Tallahassee, FL 32303	is ···· · · · · · · · · · · · · · · · ·	
Enclosed is a check	s for the following amount:				
■\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AR SEVENTI	EEN, LLC	
<u> </u>	(Name of limited liability company)	
NY		
	(Jurisdiction of its organization)	-
09/15/2017		
	(Date registered with Florida Department of State)	
M1700000789	94	
	(Florida Document Number)	
Effective Da (If an effecti more than 9 Note: If the	I liability company is withdrawing its certificate of authority ate, if other than the date of filing: N/A ive date is listed, the date must be specific and cannot be pri 0 days after filing.) date inserted in this block does not meet the applicable state Il not be listed as the document's effective date on the Depar	(optional) or to date of filing or utory filing requirements.
	(Signature of authorized representative) Michael Ziegler (Typed or printed name of signee)	2021 MAY 20 PH 3:
	(Typed or printed name of signee)	in the case

Filing Fee: \$25.00