MNOOL	009285
(Address)	000436632100
(City/State/Zip/Phone #)	FILEEL: 2024 OCT - L PH 2: 24 SECKENTALLAUVESPERFL
Certificates of Status Special Instructions to Filing Office:	RECEIVED 2024 OCT - 1 PH 3: 39 SECKLIARY OF STATE MALLARASSEL, FLORIDA
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

> ACCOUNT NO. : I20000000195 REFERENCE : 605521 7567450 AUTHORIZATION :

> > COST LIMIT : \$ 25.00

ORDER DATE : August 22, 2024

\_\_\_\_\_

ORDER TIME : 1:23 PM

ORDER NO. : 605521-090

CUSTOMER NO: 7567450

\_\_\_\_\_\_**\_\_\_**\_\_\_\_\_**\_\_\_\_**\_\_\_\_\_\_

## FOREIGN FILINGS

NAME: ALP RESIDENTIAL JASMINE, LLC

CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Miller - EXT#

EXAMINER: \_\_\_\_\_

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ALP Residential Jasmine, LLC			
(Name of limited liability company)			
Delaware	c:	20	
(Jurisdiction of its organization)	TAC:	124	
11/01/2017		)CT	Π
(Date registered with Florida Department of State)			1
M1700009285		Ph	
(Florida Document Number)	<u>्र</u> ा	- <u>.</u> ;	
This limited liability company is withdrawing its certificate of authority in this	state.	2: 2l <sub>1</sub>	
		1\	
Effective Date, if other than the date of filing: September 12, 2024 (If an effective date is listed, the date must be specific and cannot be prior to date		onal) ng 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)

Michael Kazma

(Typed or printed name of signee)

Filing Fee: \$25.00

CSC 605521