M18000000229

(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



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JUL 18 2018

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 7/18/20)18 	*****
	STATESIDE INIVESTMENTS LLC	**WALK IN**
ENTITY NAME	STATESIDE INVESTMENTS, LLC	
DOCUMENT NUM	1BER M18000000229	
	PLEASE FILE THE ATTACHED AND RETURN	
	Plain Copy	
XXXX	Certified Copy	
	Certificate of Status	
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	
	Certified Copy of Arts & Amendments	
	Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DES	•	
NUMBER OF CERT	TIFICATES REQUESTED	
TOTAL OWED_\$	\$55.00 CHECK # 5060	_
Please call Tina	a at the above number for any issues or concerns. Thank you so	much!

COVER LETTER

		n Section f Corporations		
SUBJECT:		ide Investments LLC		
		(Name of F	oreign Limited Liabilit	y Company)
Dear Sir or h	Madam:			
The enclosed	d withdi	rawal and fee(s) are submit	ted for filing.	
Please return	all cor	respondence concerning th	is matter to the following	ng;
Kelly Brune	:lle			
	<u>-</u>	(Name of Person)		_
		(Firm/Company)		_
				_
		(Address)		
		(Ciry/State and Zip Co	de)	_
For further in	ıformati	on concerning this matter,	please call:	
			(
	(N:	ame of Person)	(Area Code a	_)
STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Talla	ahassee.	Florida 32301		
Enclosed is a	check	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

Stateside Investments LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
01/09/2018
(Date registered with Florida Department of State)
M18000000229
(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: (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)
(Typed or printed name of signee)

Filing Fee: \$25.00

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