## M18000000765

(Re	questor's Name)			
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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2021 DEC 28 AM 7: 06 SECRETARY OF STATE

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#### **COVER LETTER**

то:	Registration Division of	i Section Corporations		
CHDH		)14-3, LLC		
SUBJ	ECT:	(Name of Fore	eign Limited Liability	Company)
Dear S	ir or Madam:			
The er	closed withdr	awal and fee(s) are submitte	d for filing.	
Please	return all corr	respondence concerning this	matter to the following	g:
Brian	Newman			
	<u></u>	(Name of Person)		_
c/o Sh	elving Rock, I	LLC		
		(Firm/Company)	<del>-</del>	_
601 B	rickell Key Dr	., Ste 700		
		(Address)	-	_
Miam	i, FL 33131			
		(City/State and Zip Cod	e)	_
For fu	rther informati	ion concerning this matter, p	lease call:	
Brian	Newman		866 at (	598-2546
	(%	ame of Person)	(Area Code &	& Daytime Telephone Number)
	Division P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclo	sed is a check	for the following amount:		
<b>≡</b> \$25	Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

## FILED

## 2021 DEC 28 AH 7: 07

# SECRETARY OF STATE TALLAHASSEE, FL NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SRP 2014-3, LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	<u> </u>
01/22/2018	
(Date registered with Florida Department of State)	
M18000000765	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this st 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 more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of	(optional) c of filing or ng requirements,
(Signature of authorized representative)  Brian Newman	<del></del>
(Typed or printed name of signee)	_

Filing Fee: \$25.00