M180000000609

(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:				
u. SILAS				
4 /				

Office Use Only



900378646439

01/03/22--01011--009 **25.00



COVER LETTER

	ration So on of Co	ection rporations		
SUBJECT:	S0154, I	LLC		
30bjec1		(Name of For	reign Limited Liability	Company)
Dear Sir or Mad	lam:			
The enclosed wi	ithdrawa	al and fee(s) are submitte	ed for filing.	
Please return all	corresp	ondence concerning this	matter to the following	og:
Brian Newman				
		(Name of Person)		_
c/o Shelving Ro	ock, LLO	C		
		(Firm/Company)	- <u>-</u>	_
601 Brickell Ke	y Dr., S	te 700		
		(Address)		_
Miami, FL 3313	31			
		(City/State and Zip Cod	e)	_
For further infor	mation	concerning this matter, p	olease call:	
Brian Newman			866 at (598-2546
	(Name	of Person)		& Daytime Telephone Number)
Divisi P.O. B	tration on of (Box 63	Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a ch	eck for	the following amount:		
■\$25 Filing Fe	e [330 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED

2021 AH -3 AH 10: 55

SECRETARY OF STATE NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

NS0154. LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
01/22/2018
(Date registered with Florida Department of State)
M18000000809
(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: December 31, 2021 (optional) (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)
Brian Newman
(Typed or printed name of signee)

Filing Fee: \$25.00