

M18000000849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2025 JAN -8 PM 12:06
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 1200000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date: 01/08/2025

Name: Cheyenne Davis

Reference #: 2618932

Entity Name: SARASOTA PROPERTY OWNER, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: *Cheyenne Davis*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SARASOTA PROPERTY OWNER, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JILL BLAIR

(Name of Person)

RYAN COMPANIES US, INC.

(Firm/Company)

533 S 3RD STREET #100

(Address)

MINNEAPOLIS, MN 55415

(City/State and Zip Code)

For further information concerning this matter, please call:

BRIAN C. MURRAY

(Name of Person)

at (612)

492-4000

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

SARASOTA PROPERTY OWNER, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

01/24/2018

(Date registered with Florida Department of State)

M18000000849

(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: _____ (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.

DocuSigned by:

Brian Murray

C/E889D10FCE=90

(Signature of authorized representative)

BRIAN C. MURRAY

(Typed or printed name of signee)

FILED
2025 JAN -8 PM 12:07
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

Filing Fee: \$25.00