

M18000002308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

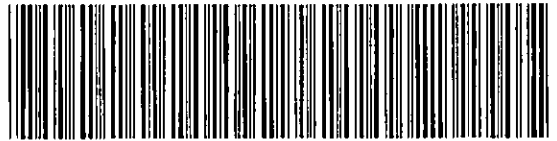
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF THE COURT
CORPORATIONS
DIVISION
TALLAHASSEE, FLORIDA

MAR 14 2023

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500.

ACCOUNT NO. : I20000000195
REFERENCE : 561088 *561088*
AUTHORIZATION :
COST LIMIT : \$ 2500

ORDER DATE : March 10, 2023
ORDER TIME : 8:28 AM
ORDER NO. : 561058-005
CUSTOMER NO: 7523987

FOREIGN FILINGS

NAME: CONCORD SIERRA NLI WPB
HOTEL, LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX 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: Alexxis Weiland-sorenson - EXT#

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CONCORD SIERRA NLI WPB HOTEL, 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:

Sarah Naumann

(Name of Person)

Concord Hospitality Enterprises Company, LLC

(Firm/Company)

11410 Common Oaks Drive

(Address)

Raleigh, NC 27614

(City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Naumann

(Name of Person)

919

2781551

at ()

(Area Code & Daytime Telephone Number)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

2023 MAR 13 AM 8:52

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CONCORD SIERRA NLI WPB HOTEL, LLC

(Name of limited liability company)

NC

(Jurisdiction of its organization)

3/7/18

(Date registered with Florida Department of State)

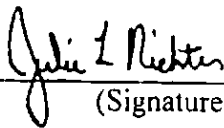
M18000002308

(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.



(Signature of authorized representative)

Julie Richter

(Typed or printed name of signee)

Filing Fee: \$25.00