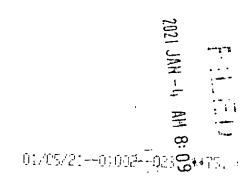
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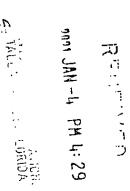
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## **CORPORATE** ACCESS,

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236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

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# NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	(Name of limited liability company)
DE	
	(Jurisdiction of its organization)
03/20/2018	( issued of its organization)
M180000027	(Date registered with Florida Department of State) 47
	(Florida Document Number)
This limited	liability company is withdrawing its certificate of authority in this state.
mective D	ite. If other than the date of Glimus
n an checu	we date is listed, the date must be specific and connect by
nore than 9	0 days after filing.)
note: If the	date inserted in this block does not meet the applicable statutory filing requirements I not be listed as the document's effective data on the D
	I not be listed as the document's effective date on the Department of State's records.
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	(Signature of authorized representative)
	(Signature of authorized representative)  Meegan T. Motisi, Authorized Person  (Typed or printed name of signce)
	(Signature of authorized representative)  Meegan T. Motisi, Authorized Person  (Typed or printed name of signce)
	(Signature of authorized representative)  Meegan T. Motisi, Authorized Person  (Typed or printed name of signce)

Filing Fee: \$25.00