M180000004036

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
rtified Copies Certificates of Status				
pecial Instructions to Filing Officer:				

Office Use Only



500356806985

12/28/20--01011--025 ++25.00

2011 Fr - - 3 PH 2: 54

Mi. Mhdiawai

FEB 0 8 2021

I ALBRITTON

COVER LETTER

TO: Registratio Division o	n Section Corporations		
NP18 SUBJECT:	2, LLC		
SUBJECT:	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withd	rawal and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this	matter to the followin	g:
Brian Newman			
	(Name of Person)		_
Shelving Rock, LL	C		
	(Firm/Company)		_
601 Brickell Key D	r., Ste 700		
	(Address)		_
Miami, FL 33131			
	(City/State and Zip Cod	e)	_
For further informat	ion concerning this matter, p	olease call:	
Brian Newman		866 at (598-2546
4)	ame of Person)		è 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
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

NP182, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
04/25/2018
(Date registered with Florida Department of State)
M18000004036
(Florida Document Number)
his limited liability company is withdrawing its certificate of authority in this state.
Effective Date, if other than the date of filing: December 31, 2020 (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.
his date will not be listed as the document's effective date on the Department of State's records.
Man
(Signature of authorized representative)
Brian Newman
(Typed or printed name of signee)
· _!

Filing Fee: \$25.00