

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000056935 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL

Account Number : 110432003053

Phone : (561)694-8107

Pax Number

: (561)694-1639

LLC DISSOLUTION OR WITHDRAWAL GHG GREYHEALTH GROUP LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

O SIMMONS

FEB 21 2020

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| GHG Greyhealth Group LLC | |
|--|------------------------------|
| (Name of limited liability company) | |
| New York | |
| (Jurisdiction of its organization) | |
| 05/11/2018 | |
| (Date registered with Florida Department of Sta | te) |
| M18000004583 | |
| (Florida Document Number) | |
| (If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable st this date will not be listed as the document's effective date on the Dept. | atutory filing requirements. |
| The Table of the Control of the Cont | 0 FEB 20 CRF (A.C. |
| (Signature of authorized representative | |
| Kevin Farewell | 2 8 |
| (Typed or printed name of signoe) | |

Filing Fee: \$25.00