## M18000005132

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	(Address)
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	(City/State/Zip/Phone #)
☐ 0 CK. 1	WAIT MAIL
	(Business Entity Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 818084 7559829 AUTHORIZATION : COST LIMIT 1: 5 25.00 ORDER DATE: May 18, 2021 ORDER TIME : 11:10 AM ORDER NO. : 818084-005 CUSTOMER NO: 7559829 FOREIGN FILINGS NAME: GRANDE COURT AT BOGGY CREEK, 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

EXAMINER:

CONTACT PERSON: Alexxis Weiland - EXT#

## **COVER LETTER**

TO: Registration Division of	s Section Corporations		
Grand	e Court at Boggy Creek,	LLC	
SOBJECT.	(Name of For	eign Limited Liability	Сотрапу)
Dear Sir or Madam:			
The enclosed withdra	awal and fcc(s) are submitte	d for filing.	
Please return all corr	respondence concerning this	matter to the followin	g:
Todd A. Copeland			
	(Name of Person)		_
RST Development	t, L.L.C.		
	(Firm/Company)		_
168 Business Park	k Dr., Suite 200		
	(Address)		<del>-</del>
Virginia Beach, Vi	rginia 23462 (City/State and Zip Cod	(c)	_
	ion concerning this matter, p		224 0070
Jennifer W. Jette,		301 at (	221-9970 _)
(N)	ame of Person)	(Area Code &	& Daytime Telephone Number)
Division of 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

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Grande Court at Boggy Creek, LLC
(Name of limited liability company)
Virginia
(Jurisdiction of its organization)
05/30/2018
(Date registered with Florida Department of State)
M18000005132
(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:
(Signature of authorized representative)
Todd A. Copeland
(Typed or printed name of signee)

Filing Fee: \$25.00