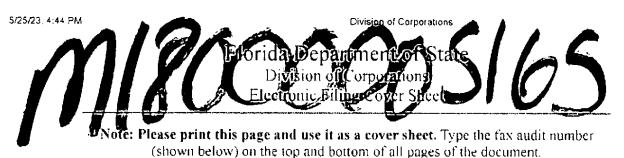
To:



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

LLC DISSOLUTION OR WITHDRAWAL 4610 S MANHATTAN AVE LLC

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	HATTAN AVE LLC		
	(Name of limited liability company)		
DELAWARI	:		
*	(Jurisdiction of its organization)		
04/04/2022			
	(Date registered with Florida Department of State)		·····
M18000005	165		
	(Florida Document Number)		
This limited	Hiability company is withdrawing its certificate of authority in th	sis state.	
(If an effect more than 9 Note: If the	ate, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to 0 days after filing.) date inserted in this block does not meet the applicable statutory II not be listed as the document's effective date on the Department.	filing requirem	r ents,
	(Signature of authorized representative)		
	(Signature of authorized representative) ALEX ENGLARD		

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