

MR. ROBERT H. BISH

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

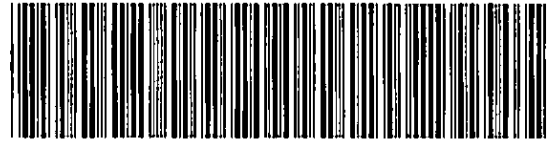
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2007 JUL 16 PM 2:46

RECEIVED
JUL 20 2007

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 335290 8102938
AUTHORIZATION : *Liquida*
COST LIMIT : \$ 25.00

ORDER DATE : June 25, 2020
ORDER TIME : 12:33 PM
ORDER NO. : 335290-030
CUSTOMER NO: 8102938

FOREIGN FILINGS

NAME: NEXT LEVEL INVESTIGATIONS, 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

CONTACT PERSON: Kadesha Roberson - EXT# 62980

EXAMINER: _____

RECEIVED
OFFICE OF THE
20 JUL 16 PM 2 18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Next Level Investigations, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melinda Davis

(Name of Person)

(Firm/Company)

739 Thimble Shoals Blvd Suite 101

(Address)

Newport News, VA 23606

(City/State and Zip Code)

For further information concerning this matter, please call:

Melinda Davis

(Name of Person)

at (757) 873-0725 x 239

(Area Code & Daytime Telephone Number)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Next Level Investigations, LLC

(Name of limited liability company)

Virginia

(Jurisdiction of its organization)

06/07/2018

(Date registered with Florida Department of State)

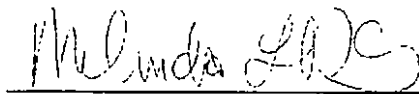
M18000005437

(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: _____ (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, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Melinda Davis

(Typed or printed name of signee)

Filing Fee: \$25.00

2016 JUN 16 PM 2:46