M1800000622

Office Use Only



200410164272

LLC Withdrawd

2029 JUN 23 AM Q 4 459

FILED

A. RAMSEY
JUN 2 **6**2023

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallabassoo El 22201

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 821683 8079848
AUTHORIZATION: CEPTELLE MAN
COST LIMIT : \$ 25.00
ORDER DATE : June 19, 2023
ORDER TIME : 9:02 AM
ORDER NO. : 821683-200
CUSTOMER NO: 8079848
FOREIGN FILINGS
NAME: LRF1 INTERSTATE INDUSTRIAL 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: Eyliena Baker - EXT#

EXAMINER: ____

COVER LETTER

TO:

Registration Section

Division of Corporations LRF1 INTERSTATE INDUSTRIAL LLC SUBJECT: _____ (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: Jenna Vargas (Name of Person) Longpoint Realty Partners (Firm/Company) 116 Huntington Ave, Suite 1001 (Address) Boston, MA 02116 (City/State and Zip Code) For further information concerning this matter, please call: 558-7310 Jenna Vargas 508 (Name of Person) (Area Code & Daytime Telephone Number) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303 Enclosed is a check for the following amount: □ \$30 Filing Fee & **■\$25** Filing Fee □\$55 Filing Fee & ☐ \$60 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy

FILED

2023 JUN 23 AM 8: 41

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LRF1 INTERSTATE INDUSTRIAL LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
07/19/2018
(Date registered with Florida Department of State)
M18000006622
(Florida Document Number)
Effective Date, if other than the date of filing:
which had_
(Signature of authorized representative)
Nilesh Bubna
(Typed or printed name of signee)

Filing Fee: \$25.00