11800006639

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500378138755

10/01/01/--01012--013/ **25.00

2971 TO 21 AM IO: 48

Y SULKER JAN 1 0 2022

COVER LETTER

TO: Registration Division of	n Section Corporations		
JC KA SU BJEC T:	W Real Estate LLC - Miran	nar Beach Villa Series	
SUBJECT.	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdr	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the followin	g:
Christy Waterman			
	(Name of Person)		_
JC KAW Real Estat	e LLC		
	(Firm/Company)		_
41 Marywood Trail			
-	(Address)		-
Wheaton, Illinois 60			-
	(City/State and Zip Cod	e)	
For further informat	ion concerning this matter, p	lease call:	
Christy Waterman		773 at (5108105
(N	ame of Person)	(Area Code &	¿ Daytime Telephone Number)
Division 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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

JC KAW Real Estate LLC - Miramar Beach Villa Series
(Name of limited liability company)
Illinois
(Jurisdiction of its organization)
June 27, 2018
(Date registered with Florida Department of State)
M 1800006639
(Florida Document Number)
Effective Date, if other than the date of filing: (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)
Christy Waterman
(Typed or printed name of signee)

Filing Fee: \$25.00