

M18000002093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

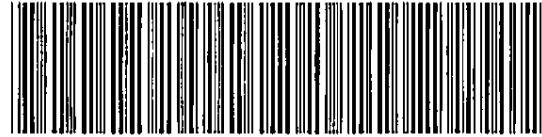
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 17 2018

T. LEONEL

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

ACCOUNT NO. : I20000000195

REFERENCE : 078358 7814304

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 25.00

ORDER DATE : December 6, 2019

ORDER TIME : 12:23 PM

ORDER NO. : 078358-035

CUSTOMER NO: 7814304

FOREIGN FILINGS

NAME: CH RETAIL FUND II/JACKSONVILLE
STRAND, L.L.C.

____ CORPORATE
____ LIMITED PARTNERSHIP
XX _____ 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: Amanda Robinson - EXT# 62968

EXAMINER: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CH Retail Fund II/Jacksonville Strand, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

August 29, 2019

(Date registered with Florida Department of State)

M18000008093

(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)

Samuel E. Peck, Vice President of Retail Managers II, L.L.C., Manager

(Typed or printed name of signee)

2019 DEC 16 AM 5:55
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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00