

M18000010245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

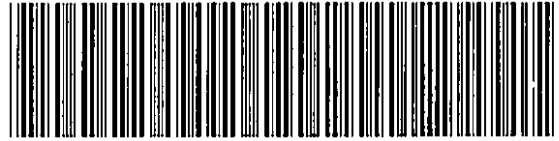
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
DEC 28 2022

Office Use Only



500399345055

SECRETARY
TALLAHASSEE

2022 DEC 27 AM 10:21

CLERK

2022 DEC 27 AM 11:34

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

ACCOUNT NO. : I20000000195

REFERENCE : 281245 8180712

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : December 22, 2022

ORDER TIME : 8:33 AM

ORDER NO. : 281245-010

CUSTOMER NO: 8180712

FOREIGN FILINGS

NAME: CMF LAUREL POINTE, LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CMF Laurel Pointe, 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:

Demi Elliott

(Name of Person)

Carter Funds, LLC

(Firm/Company)

4890 W. Kennedy Blvd., Suite 200

(Address)

Tampa, FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Demi Elliott

813

358-5981

at ()

(Name of Person)

(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

FILED
2022 DEC 27 AM 10:21
SECRETARY OF
TALLAHASSEE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CMF Laurel Pointe, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

November 14, 2018

(Date registered with Florida Department of State)

M18000010245

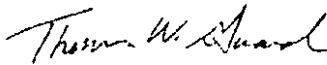
(Florida Document Number)

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)

Thomas W. Guard

(Typed or printed name of signee)

Filing Fee: \$25.00