## M180000 11159

| (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



000408986520

RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 548215 8253921

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: March 3, 2023

ORDER TIME : 9:41 AM

ORDER NO. : 548215-200

CUSTOMER NO: 8253921

## FOREIGN FILINGS

NAME: 3 BRIDGE SOLUTIONS LLC

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: Alexxis Weiland-sorenson - EXT#

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| 3 Bridge Solutions LLC   |           |                        |                                   |
|--|-----------|------------------------|-----------------------------------|
| (Name of limited liability company)  |           |                        |                                   |
| Minnesota  |           |                        |                                   |
| (Jurisdiction of its organization)   |           |                        |                                   |
| 12/10/2018   |           |                        |                                   |
| (Date registered with Florida Department of State)                                       |           |                        |                                   |
| M18000011159   |           |                        |                                   |
| (Florida Document Number)  |           |                        |                                   |
| This limited liability company is withdrawing its certificate of authority in this state | 2.        |                        |                                   |
| Effective Date, if other than the date of filing:  | requirem  | nents,                 |                                   |
| (Signature of authorized representative)   |           | 2023                   |                                   |
| James Alves, President   |           | 3<br>= 1<br>= 3<br>= 3 | و روس<br>مانو بردن د<br>مانو مانو |
| (Typed or printed name of signee)  | Y OF STAT | 3 PM 3: 5              | O                                 |

Filing Fee: \$25.00