

6/22/2020

Division of Corporations

**M190000048**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY  
Account Number : I20000000195  
Phone : (850)521-0821  
Fax Number : (850)558-1515

**LLC DISSOLUTION OR WITHDRAWAL  
JUPITER BEACHFRONT PARCEL, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

O SIGNATURE

JUN 23 2020

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**H20000190333 3****COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Jupiter Beachfront Parcel, L.L.C.

(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.

Jenelle Decoteau

(Name of Person)

(Firm/Company)

285 Madison Avenue, 20th Floor

(Address)

New York, NY 10017

(City/State and Zip Code)

For further information concerning this matter, please call.

Jenelle Decoteau

212

295-2612

at ( )

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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

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2020 JUN 22 AM 10:42

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Jupiter Beachfront Parcel, L.L.C.

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M19000000418

(Date registered with Florida Department of State)

January 11, 2019

(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)

Spencer Lehy

(Typed or printed name of signee)

Filing Fee: \$25.00

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