

M19 000000 593

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

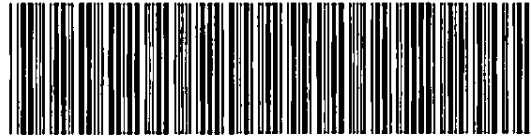
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/26/19

DC

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
2019 DEC -6 AM 9:00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MCCA KGT FUND II 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:

JOAN PAPADAKIS

(Name of Person)

CLAURE GROUP LLC

(Firm/Company)

200 BISCAYNE BLVD #4420

(Address)

MIAMI FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

JOAN PAPADAKIS

(Name of Person)

at ( 954 ) 294-7855

(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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee.<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

MCCA KGT FUND II LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

01/16/2019

(Date registered with Florida Department of State)

M19000000593

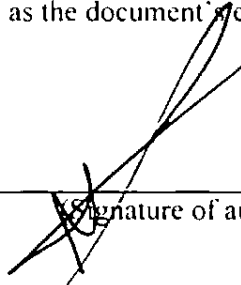
(Florida Document Number)

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)

**RAUL MARCELO CLAURE**

(Typed or printed name of signer)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2019 DEC -6 AM 9:00

Filing Fee: \$25.00