M19000000679

(Re	equestor's Name)				
(Ac	idress)				
(Ac	idress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Nar	ne)			
(Document Number)					
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AUG 0 2 2019 M. SOLOMON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 867738 7833946							
AUTHORIZATION: Spellice man							
COST LIMIT : \$ 25.00							
ORDER DATE : August 1, 2019							
ORDER TIME : 10:23 AM							
ORDER NO. : 867738-010							
CUSTOMER NO: 7833946							
FOREIGN FILINGS							
NAME: M-1515 SE 17TH OWNER, LLC							
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY							
XXXX WITHDRAWAL/CANCELLATION							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS							

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

COVER LETTER

• • • • • •

TO:

TO:			Section Corporations			
SUBJE		M-1515	SE 17TH OWNER, LLC			
JODGE.	- · · · _	•	(Name of Fo	oreign Limited Lia	bility (Company)
Dear Sir	or Ma	ıdam:				
The encl	losed v	withdra	wal and fee(s) are submitt	ed for filing.		
Please re	eturn a	il corre	spondence concerning thi	s matter to the fol	lowing	:
Camilo	Migue	el, Jr.				
			(Name of Person)			
MC Qua	ау Ма	nager, I	LLC			
			(Firm/Company)	.		
2601 S I	Baysh	ore Dri	ve, Ste. 850			
			(Address)			
Miami,	FL 33	133				
			(City/State and Zip Co	de)		
For furth	er info	rmatio	n concerning this matter, p	olease call:		
Camilo	Migue	l, Jr.		305 at (,	531-2426
·		(Na	ne of Person)		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		ration Section on of Corporations ox 6327		
Enclosed	d is a	heck f	or the following amount	:		
⊒ \$ 25 F	il i ng F	ee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing For Certified Co		☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

M-1515 SE 17	TH OWNER, LLC	
	(Name of limited liability company)	<u> </u>
Delaware		2019 AUG
	(Jurisdiction of its organization)	
January 18, 20	19	
- "	(Date registered with Florida Department of State)	
M19000000679		AH 10: 36
	(Florida Document Number)	<u> پينو</u> ۵
(If an effectiv more than 90 Note: If the d	e, if other than the date of filing: re date is listed, the date must be specific and cannot be prior to date of days after filing.) ate inserted in this block does not meet the applicable statutory filing a not be listed as the document's effective date on the Department of Sta	- CeQuirements
	(Signature of authorized representative)	
	Camilo Miguel, Jr., President of Manager	
	(Typed or printed name of signee)	

Filing Fee: \$25.00