

1119 00000 1811

(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



600337856056

12/13/19--01011--026 **60.00

Effective Date 12/11/19

FILED
STATE DEPT OF STATE
DIVISION OF CORPORATIONS
19 DEC 13 PM 12:03

withdrawal

JAN 04 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HBar Enterprises, 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:

Ronald B Sartain

(Name of Person)

HBar Enterprises, LLC

(Firm/Company)

3623 NW 13th Ave

(Address)

Gainesville FL 32605

(City/State and Zip Code)

For further information concerning this matter, please call:

Ronald B Sartain

703

786-0788

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

RECEIVED
STATE OF FLORIDA
DIVISION OF CORPORATIONS
19 DEC 13 PM 12:03

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

HBar Enterprises, LLC

(Name of limited liability company)

Alabama

(Jurisdiction of its organization)

February 11, 2019

(Date registered with Florida Department of State)

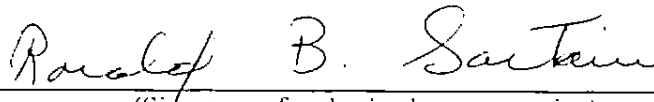
M19000001811

(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: December 31, 2019 (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)

Ronald B. Sartain

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
OFFICE
19 OCT 13 PM 12:03
TALLAHASSEE