M19 000003677

(Requ	iestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	me)
(Docu	ment Number)	·
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

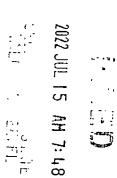
Office Use Only

lele3-



400386257904

04/22/22--01008--005 ++25.00



47121202

COVER LETTER

check #1020

TO: Registration Section Division of Corporations		
SUBJECT: <u>Stevenson</u> (Name of For	reign Limited Liability	ng.5_LLC Company)
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitted	ed for filing.	
Please return all correspondence concerning this	matter to the following	<u>;</u> ;
Lenera Stevenson (Name of Person)		_
Stevenson Keller (Firm/Company)	Holdings, L	_LC
8351 17th Ave.	NW	_
Maxbass, NO 58 (City/State and Zip Coo	760 de)	-
For further information concerning this matter, p	please call:	
Lenora Stevenson (Name of Person)	at (<u>701</u> (Area Code &) 263-7757 E Daytime Telephone Number)
Mailing Address: Registration Section		Street Address: Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	:	
□S25 Filing Fee □ S30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy
initial filing		



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

2022 JUL 15 AM 8:00

SECAL ANASSEE, FL

June 8, 2022

LENORA STEVENSON 8351 17TH AVENUE NW MAXBASS, ND 58760

SUBJECT: STEVENSON KELLER HOLDINGS, LLC

Ref. Number: M19000003677

We have received your document for STEVENSON KELLER HOLDINGS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 322A00012850

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Stevenson Keller Holdings LLC (Name of limited liability company)
(Name of limited liability company)
State of Florida and State of North Dakota (Jurisdiction of its organization)
(Jurisdiction of its organization)
(Date registered with Florida Department of State)
(Date registered with Florida Department of State)
<u>M 1900003677</u> (Florida Document Number)
(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:
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)
(Signature of authorized representative)
1 mars 5 to 1 mars 2 ma
(Typed or printed name of signee)

Filing Fee: \$25.00