

6/10/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

MI 19000006379

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To:

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

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC
 Account Number : I20020000144
 Phone : (305)520-2344
 Fax Number : (305)520-2400

**LLC DISSOLUTION OR WITHDRAWAL
 DT RETAIL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2020 JUN 10 PM 2:45

RECEIVED

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JUN 11 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DT RETAIL 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:

BRIANNA HERNANDEZ

(Name of Person)

FLORIDA EAST COAST INDUSTRIES LLC

(Firm/Company)

700 NW 1ST AVENUE, SUITE 1620

(Address)

MIAMI, FL 33136

(City/State and Zip Code)

For further information concerning this matter, please call:

JESSICA PEREZ at (305) 520-2300

(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

2020 JUN 10 Pm 2:45

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

DT RETAIL LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

07/01/2019

(Date registered with Florida Department of State)

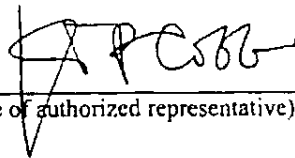
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(Florida Document Number)

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)

KOLLEEN O.P. COBB, VICE PRESIDENT

(Typed or printed name of signee)

Filing Fee: \$25.00