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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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JUL 2021

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 891390 7144729
AUTHORIZATION :
COST LIMIT : \$ 55.00
ORDER DATE : July 2, 2021
ORDER TIME : 1:33 PM
ORDER NO. : 891390-005
CUSTOMER NO: 7144729
FOREIGN FILINGS
NAME: CHARGESTAR, LLC
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS
CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER:

COVER LETTER

TO:	Registratio Division of	n Section Corporations		
SUBJ	Charg	geStar, LLC		
300,		(Name of Fo	reign Limited Liability	Company)
Dear S	ir or Madam:			
The en	closed withdi	rawal and fee(s) are submitt	ed for filing.	
Please	retum all cor	respondence concerning thi	s matter to the followin	g:
Josep	hine Chan			
		(Name of Person)		_
K&L G	Sates LLP			
		(Firm/Company)		_
4 Emb	oarcadero C	enter, Suite 1200		
		(Address)		_
San F	rancisco, C	A 94111		
		(City/State and Zip Co	de)	_
For fur	ther informat	ion concerning this matter,	please call:	
Josep	hine Chan		415 at (882-8098
	(N	ame of Person)	(Area Code 8	Daytime Telephone Number)
	Registrati Division P.O. Box	Address: on Section of Corporations 6327 ee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclo	sed is a c	heck for the followi	ng amount:	
□\$25	Filing Fee	□ \$30 Filing Fee & Certificate of Status	■ \$55 Filing Fee & Certified Copy	 \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ChargeStar, I	LLC	
	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	
July 11, 2019		
	(Date registered with Florida Department of State)	
M190000066	93	
	(Florida Document Number)	
This limited	liability company is withdrawing its certificate of authority in th	iis state.
(If an effection of the effection of the effective of the	te, if other than the date of filing:	filing requirements,
	(8)gnature of authorized representative)	:
	John Morelli	
	(Typed or printed name of signee)	2 AH 10: 50

Filing Fee: \$25.00