

9/10/2020

Division of Corporations

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

LLC DISSOLUTION OR WITHDRAWAL
4DISCOVERY LLC

Certificate of Status	0
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20 SEP 10 PM 4:36
TALLAHASSEE, FLORIDA

2020 SEP 10 PM 1:27
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4Discovery 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:

Chad Gough

(Name of Person)

4Discovery

(Firm/Company)

215 N Green St

(Address)

Chicago, IL 60607

(City/State and Zip Code)

For further information concerning this matter, please call.

Sarah O'Connor

(Name of Person)

734

845-0604

at (

_____) _____
(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

20 SEP 10 PM 4:37

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

4Discovery LLC

(Name of limited liability company)

Illinois

(Jurisdiction of its organization)

08/22/2019

(Date registered with Florida Department of State)

M19000008160

(Florida Document Number)

ALL DOCUMENTS
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CLERK'S OFFICE
20 SEP 10 PM 4:35

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)

Chad Gough

(Typed or printed name of signee)