## M19000009616

	(Requestor's Name)	
<del></del>	(Address)	
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	(Address)	·
	(City/State/Zip/Phone #)	
		_
PICK-UP	MAIT	MAIL MAIL
<del></del>	<del></del>	<del></del>
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of St	atus
		u
Cassial lastauturant	Cities Officer	
Special Instructions to	rining Officer,	

Office Use Only



300412853933

PILED PH 1: 05



CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. :	120000000195
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REFERENCE : 91428/ 7323654

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: August 1, 2023

ORDER TIME : 2:20 PM

ORDER NO. : 914281-010

CUSTOMER NO: 7323654

## FOREIGN FILINGS

NAME: SUNRISE BROKERS, LLC

CORPORATE
LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER:

## **COVER LETTER**

		i Section Corporations		
SUBJECT:		ISE BROKERS, LLC		
SOBJECT:		(Name of Fo	oreign Limited Liability	(Company)
Dear Sir or l	Madam:			
The enclosed	d withdra	awal and fee(s) are submitt	ed for filing.	
Please return	n all corr	espondence concerning thi	s matter to the followin	og:
MICHELLE	E MOEZ	ZI		
******		(Name of Person)		_
CANTOR F	FITZGE	RALD, L.P.		
		(Firm/Company)		_
110 E 59T	H STRE	ET, 7TH FLOOR		
		(Address)		
NEW YOR	K, NY 1	0022		
	_	(City/State and Zip Co	de)	_
For further in	nformati	on concerning this matter,	please call:	
MICHELLE	MOEZ	ZI	212 at (	829-4981
	(Na	ime of Person)	(Area Code o	& Daytime Telephone Number)
Re Div P.C	vision c D. Box	on Section of Corporations		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	g Fee	S30 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

SUNRISE BROKERS, LLC			
(Name of limited liability company)			
DELAWARE			
(Jurisdiction of its organization)			
10/10/2009			
(Date registered with Florida Department of State)			
M19000009616			
(Florida Document Number)			<del>-</del>
This limited liability company is withdrawing its certificate of authority in this s	tate.		
Effective Date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of	ng requi	ig or rement	
(Signature of authorized representative)  Steven Bisgay	IALLA	2029 AUG -	
(Typed or printed name of signee)	LIARY OF STATE HASSEE, FLORID 	UG -1 PM 1: 05	FILED

Filing Fee: \$25.00