

MI9000010581

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE

APR 25 2024

Office Use Only



400426817064

FILED

2024 APR 24 AM 10:08

CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

RECEIVED

2024 APR 24 PM 4:24

CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I200000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 04/23/2024

Name: Patrice Rush

Reference #: 2338976

Entity Name: ECM-BG2-DEERFIELD BEACH, FL-1-UT, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

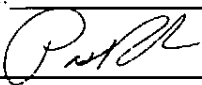
☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088
If there are any issues
please contact Patrice at
850-202-9071

Date: 04/23/2024

Name: Patrice Rush

Reference #: 2338976

Entity Name: ECM-BG2-DEERFIELD BEACH, FL-1-UT, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

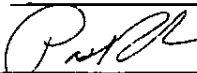
☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25.00

Signature: 

FILED
2024 APR 24 AM 10:08
RECEIVED
FLORIDA DEPARTMENT OF STATE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ECM-BG2-Deerfield Beach, FL-1-UT, LLC
(Name of limited liability company)

Utah
(Jurisdiction of its organization)

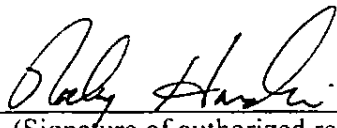
11/01/2019
(Date registered with Florida Department of State)

M19000010581
(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)

Rocky Hardin

(Typed or printed name of signee)

Filing Fee: \$25.00