

M19000010582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

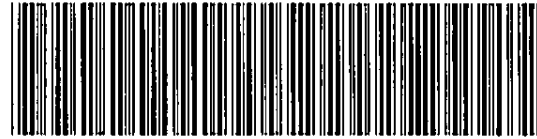
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Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

J. HORNE  
APR 25 2024

Office Use Only



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

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CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE SEVENTH 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-HOLLYWOOD, 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: 



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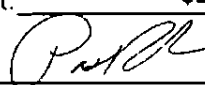
☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$25.00

Signature: 

FILED  
2024 APR 24 AM 10:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

ECM-BG2-Hollywood, FL-1-UT, LLC

(Name of limited liability company)

Utah

(Jurisdiction of its organization)

11/01/2019

(Date registered with Florida Department of State)

M19000010582

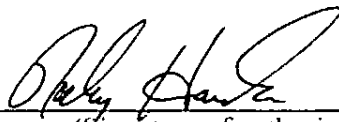
(Florida Document Number)

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)

Rockey Hardin

(Typed or printed name of signee)

**Filing Fee: \$25.00**