M19000011515

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

Office Use Only



700413369117

2023 AUG -7 AM 10: 3



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 923296 7280235

AUTHORIZATION : / //

COST LIMIT : \$\25.00

ORDER DATE : August 7, 2023

ORDER TIME : 2:32 PM

ORDER NO. : 923296-010

CUSTOMER NO: 7280235

FOREIGN FILINGS

NAME: OHM MCO, LLC

____ CORPORATE

LIMITED PARTNERSHIP

XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

COVER LETTER

.

		n Section f Corporations				
ero recor	ОНМ	MCO, LLC				
SUBJECT:		(Name of For	(Name of Foreign Limited Liability Company)			
Dear Sir or M	vfadam:					
The enclosed	d withda	rawal and fee(s) are submitte	ed for tiling.			
Please return	ı all cor	respondence concerning this	matter to the followin	g:		
JEANEDRA	A BIGO	GER				
		(Name of Person)		_		
HUDSON (GROUI	P (HG) RETAIL, LLC				
		(Firm/Company)		_		
1 MEADOV	NLAND	OS PLAZA, 6TH FLOOR				
		(Address)	·			
EAST RUT	HERF	ORD, NJ 07073				
		(City/State and Zip Cod	le)	_		
For further in	ıformat	ion concerning this matter, p	olease call:			
JEANEDRA	A BIGG	SER	201 at (939-5050		
	(N	ame of Person)		& Daytime Telephone Number)		
Reg Div P.C	zision). Box	ion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303		
Enclosed is	a check	for the following amount:				
□\$25 Filing	g 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

OHM MCO, LL	.C		
	(Name of limited liability company)		
Delaware			
	(Jurisdiction of its organization)		
12/4/2019			
	(Date registered with Florida Department of State)		
M1900001151	5		
	(Florida Document Number)		
This limited I	iability company is withdrawing its certificate of authority in this sta	ite.	
(If an effective more than 90 Note: If the d	e, if other than the date of filing: re date is listed, the date must be specific and cannot be prior to date days after filing.) ate inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of Statutory filing (Signature of authorized representative)	g re quireme	ents.
	JORDI MARTIN CONSUEGRA (Typed or printed name of signee)	SCURLIARY TALLAHASSEI	2023 AUG - 7

Filing Fee: \$25.00