

# M20000000853

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

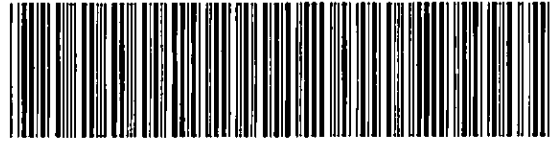
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 FEB -6 AM 11:47  
CLERK OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CW - SAVANNAH, 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:

John Cork  
\_\_\_\_\_  
(Name of Person)

Coronado West  
\_\_\_\_\_  
(Firm/Company)

8655 S. Priest Drive  
\_\_\_\_\_  
(Address)

Tempe, AZ 85284  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alisa Rotundo at (480) 820-0977  
\_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CW - SAVANNAH, LLC

(Name of limited liability company)

State of Delaware

(Jurisdiction of its organization)

January 22, 2020

(Date registered with Florida Department of State)

M20000000853

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

John Cork

(Typed or printed name of signee)

FILED  
2020 FEB -6 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FL

Filing Fee: \$25.00