

M20000001586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

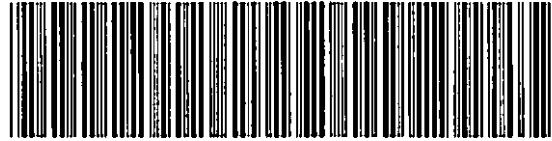
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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20 NOV 16 AM 9:00

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CLERK OF STATE
REGISTRATION

withdrawal

DEC 18 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Berry's Apex Home Remodeling, 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:

Alan Berry
(Name of Person)

Apex Home Remodeling LLC
(Firm/Company)

962 17. Fairview Avenue
(Address)

Decatur, Illinois 62522
(City/State and Zip Code)

20 NOV 16 AM 9:00

RECEIVED
DIVISION OF
CORPORATIONS

For further information concerning this matter, please call:

Alan Berry at (217) 519-0402
(Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address:

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

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 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

APEx HOME Remodeling, LLC
(Name of limited liability company)

Macon County, Illinois
(Jurisdiction of its organization)

2-10-2020

(Date registered with Florida Department of State)

M20000001586

(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.

Alan Berry

(Signature of authorized representative)

ALAN Berry

(Typed or printed name of signee)

20 NOV 16 AM 9:00

DEPT OF STATE
CLERK