## M20 000002019

(Re	equestor's Name)			
,	,			
	Idea and			
(Ad	dress)			
(Address)				
(Cit	ty/State/Zip/Phone	#)		
☐ PICK-UP	☐ WAIT	MAIL		
	siness Entity Nam			
DO)	Siless Entity Nam	( <del>-</del> )		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Eiling Officer:			
Special Instructions to Filing Officer:				
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C. BRUMBLE Y SEP 2 3 2022

## **COVER LETTER**

TO:			i Section Corporations		_
Z18185 18	cur.	Southe	rn Fibernet Communicatio	ns LLC	ŕ
SUBJE	.CI:		(Name of Fo	reign Limited Liability	(Company)
Dear Si	r or N	4adam:			
The end	closed	withdra	awal and fee(s) are submitt	ed for filing.	
Please .	return	all corn	espondence concerning thi	s matter to the following	og:
Bryan	Sumn	er			
			(Name of Person)		_
Southe	rn Fib	pernet C	ommunications LLC		
			(Firm/Company)		<del>-</del>
55 Ma	rietta	St NW	Suite 1000		
			(Address)		_
Atlanta	a, GA	30303			
			(City/State and Zip Co	de)	
For fur	ther in	nformati	ion concerning this matter,	please call:	
Claire	Brime	er		678 at (	701-1123
		(N	ame of Person)		& Daytime Telephone Number)
	Reg Div P.C	vision ( ). Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclos	ed is	a check	for the following amoun	<b>:</b>	
□\$25	Filing	g Fee	S30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	<ul><li>\$60 Filing Fee,</li><li>Certificate of Status &amp;</li><li>Certified Copy</li></ul>

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Southern Fibernet Communications LLC	
(Name of limited liability company)	_
State of Georgia	
(Jurisdiction of its organization)	_
February 10,2020	
(Date registered with Florida Department of State)	_
M20000002019	
(Florida Document Number)	_
This limited liability company is withdrawing its certificate of authority in this state.	
(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.	<b>,</b>
T. Bryan Stynna (Signature of authorized representative)	<b>∆</b>
T. Bryan Sumner	[]]
(Typed or printed name of signee)	1/ED
	93

Filing Fee: \$25.00