M20 000003243

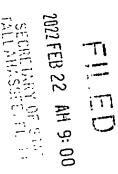
	Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	
FE	3 2 8 2022	

Office Use Only



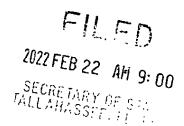
300381828013

02/22/22--01011--024 **25.00



COVER LETTER

TO:		gistration rision of (Section Corporations		
		ARCO	Specialty Construction, LLC		4 a
SUBJ	ECT:	••	(Name of Fore	eign Limited Liability	Company)
Dear S	Sir or N	Madam:			
The en	closed	d withdra	wal and fee(s) are submitted	d for filing.	
Please	returr	all corre	espondence concerning this	matter to the following	g:
Austin	ı Moo	re			
			(Name of Person)	<u>-</u>	-
ARCO) Spec	ialty Cor	nstruction, LLC		
			(Firm/Company)		-
900 N	Rock	Hill Roa	d		
			(Address)		_
St. Lo	uis, M	IO 63119			
	_		(City/State and Zip Code	c)	-
For fu	rther i	nformatio	on concerning this matter, p	lease call:	
Austir	ı Moo	re		314 at (918-2119
		(Na	me of Person)	(Area Code &	& Daytime Telephone Number)
	Re Di P.0	vision o	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclo	sed is	a check	for the following amount:		
A (\$2:	5 Filin	g Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status &



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ARCO Specialty Construction, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
3/23/2020
(Date registered with Florida Department of State)
M2000003243
(Florida Document Number)
Effective Date, if other than the date of filing:
(Signature of authorized representative)
Austin Moore Chief Accounting Officer (Typed or printed name of signee)

Filing Fee: \$25.00