M2000006010

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Ch # 2027

TO: Registration Division of	Section Corporations	•	·
	Meridian Place, LLC		
SUBJECT:	(Name of Fore	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	d for filing.	
Please return all corre	espondence concerning this	matter to the following	g:
Greg Litvak			
	(Name of Person)		-
RRE Meridian Place	Associates, LLC		
	(Firm/Company)	<u>.</u>	-
511 16th Street Mall	. Suite 200		
	(Address)		-
Denver, CO 80202			
	(City/State and Zip Code	e)	_
For further informati	on concerning this matter, p	lease call:	
Greg Litvak		303 at (905-4910
(Na	une of Person)		& Daytime Telephone Number)
Division of P.O. 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
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

Dahlia Meridian Place, LLC	
(Name of limited liability company)	
СО	
(Jurisdiction of its organization)	
07/08/2020	
(Date registered with Florida Department of State)	
M20000006010	
(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:(option	al)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing require this date will not be listed as the document's effective date on the Department of State's re-	ements,
L	
(Signature of authorized representative)	
Greg Litvak	
(Typed or printed name of signee)	ones Arc

Filing Fee: \$25.00