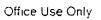
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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	<i>(</i>)
PICK-UP WAIT	MAIL
(Business Entity Name)
(Document Number)	
Certified Copies Certificates o	f Status
Special Instructions to Filing Officer	





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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 265351 4330432 AUTHORIZATION : COST LIMIT : ORDER DATE: November 23, 2021 ORDER TIME : 8:25 AM ORDER NO. : 265351-005 CUSTOMER NO: 4330432 FOREIGN FILINGS NAME: AEROCLEAN TECHNOLOGIES, LLC CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER:

COVER LETTER

TO: Registration Division of	n Section Corporations		
AeroC	Clean Technologies, LLC		
30bacc1.	(Name of Fo	reign Limited Liability	(Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	ed for filing.	
Please return all corr	respondence concerning this	matter to the followin	ığ:
Ryan Tyler			
	(Name of Person)		_
AeroClean Techno	ologies, Inc.		
	(Firm/Company)		_
10455 Riverside D	Prive, Suite 100		
	(Address)		_
Palm Beach Garde	ens, Florida 33410		
	(City/State and Zip Cod	le)	_
For further informati	on concerning this matter, p	olease call:	
Ryan Tyler		561 at (262-6039
(N	ame of Person)	(Area Code &	& 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

Filing Fee: \$25.00