

M20000008387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

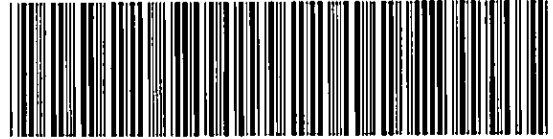
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 FEB 10 AM 9:39

SECRETARY OF STATE  
TALLAHASSEE, FL

RECEIVED

2022 FEB 10 AM 11:55

SECRETARY OF STATE  
TALLAHASSEE, FL

W. J. Albritton

FEB 11 2022  
ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 468431 7456992

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : February 9, 2022

ORDER TIME : 9:20 AM

ORDER NO. : 468431-015

CUSTOMER NO: 7456992

FOREIGN FILINGS

NAME: LNDMRK WAGS LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

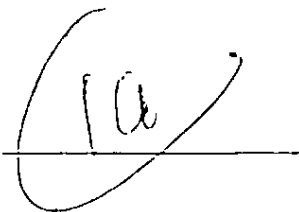
XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER:



## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LNDMRK WAGS 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:

Kathy Darden

(Name of Person)

Polsinelli PC

(Firm/Company)

150 N. Riverside Plaza, Suite 3000

(Address)

Chicago, IL 60606

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathy Darden

(Name of Person)

at (312) 463-6381  
(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:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LNDMRK WAGS LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

September 24, 2020

(Date registered with Florida Department of State)

M20000008387

(Florida Document Number)


FILED  
2022 FEB 10 AM 9:39  
SECRETARY OF STATE  
TALLAHASSEE, FL

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.

  
\_\_\_\_\_  
(Signature of authorized representative)

Scott Sherman

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**