M200009499

(Requestor's Name)				
(Adcress)				
(Address)				
(City/State/Zip/Phone #)				
(Sity/otate/Zip//Tione 4)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certificates of Status				
instructions to Filing Officer:				
-				
J. HORNE				
J. 1107114L				
ADD 1 2000				
APR - 3 2023				
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Office Use Only



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2023 MAR 31 AM 10:

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

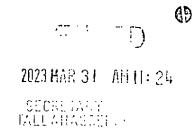
ACCOUNT NO. : I2000000195
REFERENCE : 624306 8134272
AUTHORIZATION: SAMIRE BOOM
COST LIMIT : \$ 25.00
ORDER DATE: March 30, 2023
ORDER TIME : 10:23 AM
ORDER NO. : 624306-045
CUSTOMER NO: 8134272
FOREIGN FILINGS
NAME: GAINESVILLE PLAZA OUT PARCEL OWNER, LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

TO: Registration Division of	Section Corporations		
Gaines	sville Plaza Out Parcel Ow	ner, LLC	
someer.	(Name of Fore	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitted	l for filing.	
Please return all corre	espondence concerning this	matter to the following	g:
Cameron Shu il			
	(Name of Person)	_	-
Wicker Park Capita	al Management, LLC		
	(Firm/Company)		-
356 Martin Luther I	King Jr. Blvd, Suite B		
	(Address)	_	_
Savannah, GA 314	101		
-	(City/State and Zip Code	e)	_
For further informati	on concerning this matter, p	lease call:	
Cameron Shull		912 aı (999-3119
(Na	ame of Person)	(Arca Code &	è 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:		
□\$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

ainesville Plaza Out Parcel Owner, LLC
(Name of limited liability company)
relaware
(Jurisdiction of its organization)
0/22/2020
(Date registered with Florida Department of State)
120000009499
(Florida Document Number)
this limited liability company is withdrawing its certificate of authority in this state. If an effective Date, if other than the date of filing:
(Signature of authorized representative) Blake Berg
(Typed or printed name of signee)

Filing Fee: \$25.00