Ma0000010506

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

Office Use Only



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10/20/25

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

ACCOUNT NO.	: 12000000195		
REFERENCE			
AUTHORIZATION	Specific Contraction of the Cont		
COST LIMIT	: \$ 25.00		
ORDER DATE : 10/29			
ORDER TIME :			
ORDER NO. :			
CUSTOMER NO:			
FOREIGN FILINGS			
NAME :			
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPAN	Y		
XXXX WITHDRAWAL/CANCELLATION			
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:		
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS			
CONTACT PERSON:			
	EXAMINER:		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

B9 Pinelands AC Ow	mer LLC	
	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	
11/16/2020		
	(Date registered with Florida Department of State)	
M20000010506		
	(Florida Document Number)	
This limited liabilit	y company is withdrawing its certificate of authority in this state.	
(If an effective date more than 90 days a Note: If the date ins	is listed, the date must be specific and cannot be prior to date of fili	iirements.
<u>/s/ N</u>	Melanie Martin	
	(Signature of authorized representative)	
Mela	anie Martin	PIRE OCT 29 PI
	(Typed or printed name of signee)	3 7
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Filing Fee: \$25.00 678665