m20000011452

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

Office Use Only



400431207384

LLC Withdraws



RECEIVED
2024-JUL-2 AHII: 17

JUL 3 2024 A RAMSEY

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

CONTACT PERSON: Amanda Miller - EXT#

Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 | | | | | |
|---|--|--|--|--|--|
| REFERENCE : 518142 8329413 | | | | | |
| AUTHORIZATION : Line Blesson | | | | | |
| COST LIMIT : \$/25.00 | | | | | |
| ORDER DATE : June 26, 2024 | | | | | |
| ORDER TIME : 4:32 PM | | | | | |
| ORDER NO. : 518142-105 | | | | | |
| CUSTOMER NO: 8329413 | | | | | |
| FOREIGN FILINGS | | | | | |
| NAME: RED KNIGHT SKYTAIN - HUDSON 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:

COVER LETTER

| | ration Se on of Co | ection rporations | | |
|--|-----------------------|--|--------------------------------------|--|
| | ed Knig | ht Skytain - Hudson LL | С | |
| SUBJECT: | | (Name of Fore | ign Limited Liability | Company) |
| Dear Sir or Mac | dam: | | | |
| The enclosed w | ithdrawa | al and fee(s) are submitted | I for filing. | |
| Please return al | corresp | ondence concerning this | matter to the following | <u>g</u> : |
| | | (Name of Person) | <u>.</u> | · |
| | | | | |
| | | (Firm/Company) | | _ |
| | | (Address) | | _ |
| | | (City/State and Zip Code | <u> </u> | _ |
| For further info | rmation | concerning this matter, p | lease call: | |
| Brian Leonard | | | 513 at (| 288-7815 |
| | (Name | e of Person) | (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 c | check fo | r the following amount: | | |
| □\$25 Filing F | Fee l | ☐ \$30 Filing Fee & Certificate of Status | □\$55 Filing Fee & Certified Copy | ☐ \$60 Filing Fee, Certificate of Status & Certified Copy |

FILED
2024 JUL-2 AMII: 28

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Red Knight Skyta | in - Hudson LLC |
|--|--|
| <u> </u> | (Name of limited liability company) |
| New Jersey | |
| | (Jurisdiction of its organization) |
| 12/10/2020 | |
| - | (Date registered with Florida Department of State) |
| M20000011452 | |
| | (Florida Document Number) |
| (If an effective of more than 90 da Note: If the date | f other than the date of filing: |
| _ | (Signature of authorized representative) |
| E | Brian Leonard, Manager |
| _ | (Typed or printed name of signee) |

Filing Fee: \$25.00