

m21000004650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

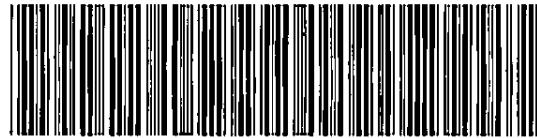
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/08/21--01004--007 **25.00

RECEIVED
2021 JUN -7 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dropping
D/B/A

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ALBA CAPITAL THREE LLC

Signature _____

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2021

CAPITAL CONNECTION, INC.

SUBJECT: ALBA CAPITAL THREE FLORIDA, LLC
Ref. Number: M21000004650

We have received your document for ALBA CAPITAL THREE FLORIDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 421A00012462

RECEIVED

2021 JUN -9 PM 2:10

ALLAHASSEE, FLOR.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALBA CAPITAL THREE, LLC
(Name of Limited Liability Company)

DOCUMENT NUMBER: M21000004650

The enclosed *Resolution of the members, managers, or other authorized persons to Withdraw the Alternate name for use in Florida* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jay E. Auerbach, Esq.

(Name of Contact Person)

KHANI & AUERBACH

(Firm/Company)

2338 Hollywood Blvd.

(Address)

Hollywood, FL 33020

(City/State and Zip Code)

For further information concerning this matter, please call:

Jay E. Auerbach, Esq.

(Name of Contact Person)

at (954) 921-1517

(Area Code) (Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(Additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is enclosed)

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

**RESOLUTION TO WITHDRAW
ALTERNATE NAME IN THE STATE OF
FLORIDA PURSUANT TO
605.0906 (1), FLORIDA STATUTES**

I, the undersigned, do hereby certify that I am the Authorized Person of

ALBA CAPITAL THREE, LLC

(Name of Limited Liability Company)

, a limited liability

company duly organized and existing under the laws of Delaware

(State or Country of Organization)

Because the name of this foreign limited liability company now satisfies the requirements of s. 605.0112, Florida Statutes, the limited liability company hereby renounces the following alternate name in the state of Florida:

ALBA CAPITAL THREE FLORIDA, LLC

(Alternate Name Renounced in State of Florida)


Signature of Authorized Person

6/8/21
Date

Make check payable to Florida Department of State and mail to:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314