

M21000008805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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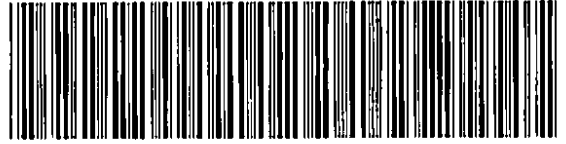
(Business Entity Name)

(Document Number)

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2022 MAR -7 PM12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2022 MAR -7 AM10:05

SECRETARY OF STATE
TALLAHASSEE, FL

Withdrawn

MAR 08 2022
ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 529609 86218A

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : March 4, 2022

ORDER TIME : 8:36 AM

ORDER NO. : 529609-005

CUSTOMER NO: 86218A

FOREIGN FILINGS

NAME: THE VETS OF BOYNTON BEACH
ANIMAL HOSPITAL 1, LLC

 CORPORATE
 LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER: *(10)*

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

THE VETS OF BOYNTON BEACH ANIMAL HOSPITAL 1, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

July 12, 2021

(Date registered with Florida Department of State)

M21000008805

(Florida Document Number)

FILED
2022 MAR -7 AM 10:05
CLERK 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.

DocuSigned by:

Dori Fussman

39B5F468523F49A

(Signature of authorized representative)

Dori Fussman

(Typed or printed name of signee)

Filing Fee: \$25.00