(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:
J. HORNE JUN 28 2024

Office Use Only

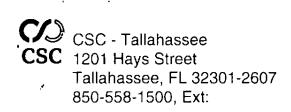


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RECFIVED



To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 06/26/24 Order #: 1543656-1

Re: Alliance 2700 Gateway LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

Amount to be deducted from our State Account: \$30.0 - FL State Account Number:

1200000000195 AUTH Spreis Reman

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	Registration Division of	Section Corporations		
SUBJE	CT: Al	liance 2700 Gateway LLC		
	<u> </u>	(Name of For	eign Limited Liability	Company)
Dear Sir	or Madam:			
The enc	losed withdra	awal and fee(s) are submitte	d for filing.	
Please re	eturn all corr	espondence concerning this	matter to the followin	g:
		(Name of Person)		_
		(Firm/Company)		_
		(Funicompany)		
		(Address)		_
		(City/State and Zip Code	e)	_
For furth	her informati	on concerning this matter, p	lease call:	
	(N:	ame of Person)	at (
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
Enclose	d is a check	for the following amount:		
□\$25 I	Filing Fee	S30 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

Alliance 2700 Gateway LLC
(Name of limited liability company)
DE.
(Jurisdiction of its organization)
(varisaction of its organization)
11/19/2021
(Date registered with Florida Department of State)
M21000015650
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing:
(Signature of authorized representative)
Richard Previdi
(Typed or printed name of signee)

WD-7169

Filing Fee: \$25.00