

M21000016679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

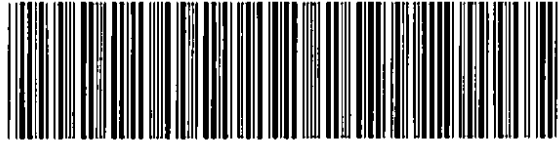
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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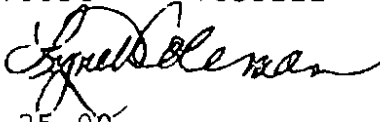
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2022 DEC - 1 AM 10: 21
TOLSON, STATE

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ALLAHASSEE, FLOR

A E C 111

DEC - 2 2022

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

ACCOUNT NO. : I20000000195
REFERENCE : 170034 7853222
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : December 1, 2022
ORDER TIME : 2:08 PM
ORDER NO. : 170034-030
CUSTOMER NO: 7853222

FOREIGN FILINGS

NAME: SILVERVIEW CLO II OWNER LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER: _____

FILED

2022 DEC -1 AM 10: 21

STATE OF FLORIDA
DEPARTMENT OF STATE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Silverview CLO II Owner LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

12/09/2021

(Date registered with Florida Department of State)

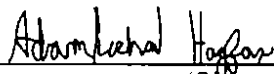
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(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: December 1, 2022 (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.



(Signature of authorized representative)

Adam Hagfors

(Typed or printed name of signee)

Filing Fee: \$25.00