(Requestor's Name) (Address)	
(Address)	900424290779
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
pecial Instructions to Filing Officer	
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	((850) 656-4724	
DATE <u>02/21/2024</u>	_		**WALK IN**
ENTITY NAME Palifox	Tampa, LLC		
DOCUMENT NUMBER			
	PLEASE FILE (THE ATTACHED AND RETURN	
			- 7
XXXXXXXXX	Plain Copy		
	Certified Copy		
	Certificate of Status	\$	0:0
*	*PLEASE OBTAIN THE Certified Copy of A Certificate of Good o		
	APOSTILLE' /	NOTARIAL CERTIFICATION	
COUNTRY OF DESTINA NUMBER OF CERTIFICA			
TOTAL OWED ^{\$25}		ACCOUNT #: 1201600000	72
Please call Tina at	the above number fo	or any issues or concerns. Thank you	so much!

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee. Florida 32312

COVER LETTER

TO:	Registration Section
	Division of Corporations

Palifox Tampa, LLC

SUBJECT:

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rebecca Saferstein, Senior Paralegal

(Name of Person)

Arnall Golden Gregory LLP

(Firm/Company)

171 17th Street, NW, Suite 2100

(Address)

Atlanta, GA 30363

(City/State and Zip Code)

For further information concerning this matter, please call:

 Rebecca Saferstein
 404
 870-5604

 (Name of Person)
 (Area Code & Daytime Telephone Number)

<u>Mailing Address:</u> 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

0:01

Enclosed is a check for the following amount:

■\$25 Filing Fee	🗆 \$30 Filing Fee &	□\$55 Filing Fee &	🖾 \$60 Filing Fee,
-	Certificate of Status	Certified Copy	Certificate of Status &
			Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Palifox Tampa, LLC		
	(Name of limited liability company)	
Georgia	(Jurisdiction of its organization)	
12/09/2021	(Date registered with Florida Department of State)	
M21000016877		
	(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: __________(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.)

more than 90 days after filling.) 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.

Aural

(Signature of authorized representative)

Adam Brookner

, *•*

- **-** -

(Typed or printed name of signee)

10:01

Filing Fcc: \$25.00