

M21000017193

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

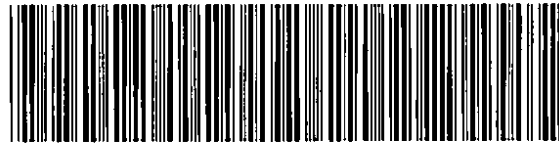
(Business Entity Name)

(Document Number)

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2022 DEC -1 AM 10:24  
STATE

RECEIVED  
2022 DEC -1 PM 3:40  
ALLAHASSEE, FLORIDA

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 : \$ 254.00

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ORDER DATE : December 1, 2022  
ORDER TIME : 2:08 PM  
ORDER NO. : 170034-035  
CUSTOMER NO: 7853222  
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FOREIGN FILINGS

NAME: SILVERVIEW CLO III OWNER LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX 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: \_\_\_\_\_

FILED  
2022 DEC -1 AM 10:24

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Silverview CLO III Owner LLC  
\_\_\_\_\_  
(Name of limited liability company)

Delaware  
\_\_\_\_\_  
(Jurisdiction of its organization)

12/09/2021  
\_\_\_\_\_  
(Date registered with Florida Department of State)

M21000017193  
\_\_\_\_\_  
(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.

Adam Hagfors  
\_\_\_\_\_  
(Signature of authorized representative)

Adam Hagfors  
\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**