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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 : (855)498-5500 Fax Number : (800)432-3622

LLC DISSOLUTION OR WITHDRAWAL OCHE FLORIDA, LLC

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COVER LETTER

	gistration vision of C	Section Corporations			
CURIECT.		FLORIDA, LLC			
SUBJECT:		(Name of Foreign Limited Liability Company)			
5 0' V					
Dear Sir or I					
		wal and fee(s) are submitted			
Please return	n all corre	spondence concerning this	matter to the following	g:	
Leslie A. Br	rault, Para	alegal Specialist			
		(Name of Person)		-	
DLA PIPER	R LLP (U	S)		_	
		(Firm/Company)			
2525 E. Car	melback F	Road, Suite 1000		_	
		(Address)			
Phoenix, Ar	rizona 85	016			
		(City/State and Zip Code	:)	_	
For further i	informatic	on concerning this matter, p	lease call:		
Leslie A. B	rault, Pan	alegal Specialist	480 at (606.5125	
	(Na	me of Person)	(Area Code &	& Daytime Telephone Number)	
Re Di P.	ivision o O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is	a check	for the following amount:			
□\$25 Filir	ng Fec	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	 \$60 Filing Fee, Certificate of Status & Certified Copy 	

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

OCHE FLORID	OA, LLC	
	(Name of limited liability company)	
DELAWARE		
	(Jurisdiction of its organization)	
January 5, 2022		
	(Date registered with Florida Department of State)	
M2200000031	4	
	(Florida Document Number)	
This limited l	iability company is withdrawing its certificate of authority in this s	tate.
(If an effective more than 90 Note: If the d	e, if other than the date of filing: ye date is listed, the date must be specific and cannot be prior to dat days after filing.) late inserted in this block does not meet the applicable statutory fili not be listed as the document's effective date on the Department of Document by: Kickard White	ng requirements,
	(Signature of authorized representative)	
	(Typed or printed name of signee)	
	Filing Fee: \$25.00	FILED 2022 APR 28 AM 8: 0