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Wilhdiawal.

MAR 0 7 2022 ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 527783 8212581

AUTHORIZATION : Spelle mp.

COST LIMIT : \$ '2'5 \ \ '00

ORDER DATE: March 4, 2022

ORDER TIME : 9:39 AM

ORDER NO. : 527783-005

CUSTOMER NO: 8212581

FOREIGN FILINGS

NAME: LAKEVIEW PV1, LLC

____ CORPORATE
LIMITED PARTNERSHIP

XXXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER:

COVER LETTER

	stration S sion of C	orporations		
	Lakevie	w PV1, LLC		
SUBJECT:		(Name of Fo	reign Limited Liability	Company)
Dear Sir or M	adam:			
The enclosed	withdray	val and fee(s) are submitte	ed for filing.	
Please return a	all corres	pondence concerning this	s matter to the followin	g:
Anna Henry				
		(Name of Person)	• • • •	_
Ecoplexus Ir	nc.			
		(Firm/Company)		_
PO Box 130	92			
		(Address)		_
Durham, NC	27709			
		(City/State and Zip Coo	le)	_
For further inf	formation	n concerning this matter.	please call:	
Anna Henry			434 at (962-1279
· · · · · · · · · · · · · · · · · · ·	(Nan	e of Person)		& Daytime Telephone Number)
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
Enclosed is a	check fo	r the following amount:		
□\$25 Filing	Fee	□ \$30 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

Lakeview PV1,	LLC	
	(Name of limited liability company)	2
Delaware		2022 HAR
	(Jurisdiction of its organization)	
February 24, 2	022	芸芸
	(Date registered with Florida Department of State)	SE SE
M2200000296	9	T
	(Florida Document Number)	•
more than 90 (Note: If the da	e, if other than the date of filing: e date is listed, the date must be specific and cannot be prior to date days after filing.) ate inserted in this block does not meet the applicable statutory file not be listed as the document's effective date on the Department of	ing requirements,
	(Signature of authorized representative)	
	John Gorman	
	(Typed or printed name of signee)	

Filing Fee: \$25.00