## M22000004232

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(400				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				





200442601542

FILED
2025 JAN 14 AM 10: 42

2025 JAN 14 PH 3:

MECHIVED

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

ACCOUNT NO. : 12000000195

REFERENCE : 888140 7898057

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE: January 9, 2025

ORDER TIME : 11:57 AM

ORDER NO. : 888140-050

CUSTOMER NO: 7898057

\_\_\_\_\_\_

## FOREIGN FILINGS

NAME: BCORE 455 E SHORE DR OWNER LLC

CORPORATE
LIMITED PARTNERSHIP
X 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: Shauna Godbolt - EXT#

EXAMINER: \_\_\_\_\_

## **COVER LETTER**

		Section Corporations			
SUBJECT:	BCORE 455 E Shore Dr Owner LLC				
SUBJECT:		(Name of For	eign Limited Liability	Company)	
Dear Sir or M	viadam:				
The enclosed	d withdra	awal and fee(s) are submitte	d for filing.		
Please return	all corr	espondence concerning this	matter to the followin	g:	
				_	
		(Name of Person)		_	
			<u></u> .	_	
		(Firm/Company)			
		(Address)		_	
		(riddiess)			
		(City/State and Zip Cod	e)	_	
For further in	nformati	on concerning this matter, p	olease call:		
			at (		
	(Na	ime of Person)	(Area Code &	& 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	for the following amount:			
□\$25 Filing	g Fee	☐ \$30 Fifing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	<ul><li>\$60 Filing Fee,</li><li>Certificate of Status &amp;</li><li>Certified Copy</li></ul>	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

BCORE 455	E Shore Dr Owner LLC	
	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	· · · · · · · · · · · · · · · · · · ·
03/21/2022		
	(Date registered with Florida Department of State)	
M220000042	32	
	(Florida Document Number)	
This limited	liability company is withdrawing its certificate of authority in th	nis state.
(If an effection more than 90 Note: If the o	te, if other than the date of filing:	filing requirements,
	Mssan Shale	
	(Signature of authorized representative)	
	Nissan Shah	<b>202</b> Tăi
	(Typed or printed name of signee)	PHLED  2025 JAN 14 AM 10: 42  ALLAHASSEE, FLORIDA

Filing Fee: \$25.00