

M22 00000 4475

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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

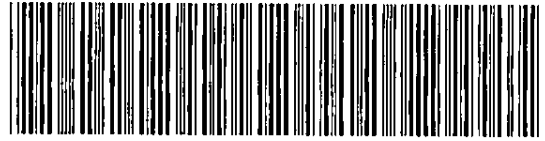
(Business Entity Name)

(Document Number)

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2024 DEC 30 PM 12:43 2024 DEC 30 PM 3:52

STATE OF FLORIDA
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA 32399-0001

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SARC FL - Tampa, LLC
(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:

Natalie Riley

(Name of Person)

SARC USA, Inc.

(Firm/Company)

718 W Business Highway 60

(Address)

Dexter MO 63841

(City/State and Zip Code)

For further information concerning this matter, please call:

Natalie Riley

(Name of Person)

at (573) 624-8901 ext 110

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for 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

SARC FL - Tampa, LLC

(Name of limited liability company)

Missouri

(Jurisdiction of its organization)

March 24, 2022

(Date registered with Florida Department of State)

M22000004475

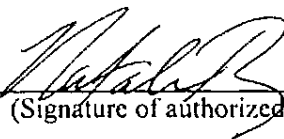
(Florida Document Number)

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.)

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.



(Signature of authorized representative)

Natalie Riley

(Typed or printed name of signee)

2024 DEC 30 PM 3:52
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

Filing Fee: \$25.00