

M220000006096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

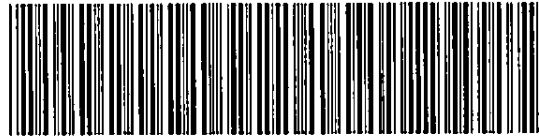
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
APR 26 2023

Office Use Only



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2023 APR 25 PM 1:11
SECRETARY
TALLAHASSEE

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2023 APR 25 PM 4:24
TALLAHASSEE
FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 04/25/2023

Name: Merritt Walker

Reference #: 1967147

Entity Name: AE HOLDCO III LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion


☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25

Signature: 



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Account#: 120000000088

Date: 04/25/2023Name: Merritt WalkerReference #: 1967147Entity Name: AE HOLDCO III LLC☐ Articles of Incorporation/Authorization to Transact Business☐ Amendment☐ Change of Agent☐ Reinstatement☐ Conversion☐ Merger☒ Dissolution/Withdrawal☐ Fictitious Name☐ Other _____Authorized Amount: \$25Signature: *mw*

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AE HOLDCO III 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:

GHADA SKAFF

(Name of Person)

LIESER SKAFF ALEXANDER

(Firm/Company)

403 N. HOWARD AVE

(Address)

TAMPA, FL 33606

(City/State and Zip Code)

For further information concerning this matter, please call:

GHADA SKAFF at () 813 280-1256

(Name 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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

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2023 APR 25 PM 4:11
SECRETARY OF
TALLAHASSEE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AE HOLDCO III LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

4/19/2022

(Date registered with Florida Department of State)

M122000006096

(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)

JAY YOOK

(Typed or printed name of signee)

Filing Fee: \$25.00