

M22000013996

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

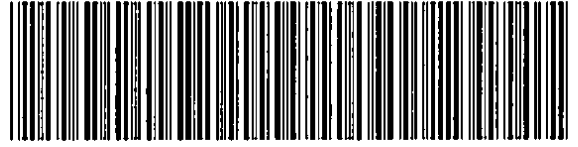
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
MAR 16 2023

Office Use Only



900403558529

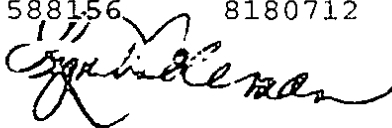
2023 MAR 15 AM 9:24  
SECRETARY OF  
TALLAHASSEE

2023 MAR 15

AD

RECEIVED  
2023 MAR 15 PM 2:54  
OFFICE OF THE  
CLERK OF THE  
SUPREME COURT  
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195  
REFERENCE : 588156 8180712  
AUTHORIZATION :   
COST LIMIT : \$ 25.00

-----  
ORDER DATE : March 15, 2023

ORDER TIME : 12:58 PM

ORDER NO. : 588156-010

CUSTOMER NO: 8180712  
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FOREIGN FILINGS

NAME: CX SEALOFTS AT BOYNTON VILLAGE  
LEASECO, LLC

\_\_\_\_ CORPORATE  
\_\_\_\_ LIMITED PARTNERSHIP  
XX 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: Alexxis Weiland-sorenson - EXT#

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CX SEALOFTS AT BOYNTON VILLAGE LEASECO, 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:

Demi Elliott

\_\_\_\_\_  
(Name of Person)

Carter Funds, LLC

\_\_\_\_\_  
(Firm/Company)

4890 W. Kennedy Blvd., Suite 200

\_\_\_\_\_  
(Address)

Tampa, FL 33609

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Demi Elliott

\_\_\_\_\_  
(Name of Person)

813

358-5981

at (\_\_\_\_\_) \_\_\_\_\_

(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 Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

FILED  
2023 MAR 15 AM 9:23  
SECRETARY  
TALLAHASSEE

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CX SEALOFTS AT BOYNTON VILLAGE LEASECO, LLC

\_\_\_\_\_  
(Name of limited liability company)

Delaware

\_\_\_\_\_  
(Jurisdiction of its organization)

September 9, 2022

\_\_\_\_\_  
(Date registered with Florida Department of State)

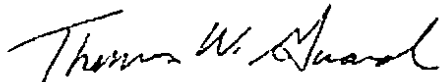
M22000013992

\_\_\_\_\_  
(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)

Thomas W. Guard

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**