

M22 000015921

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

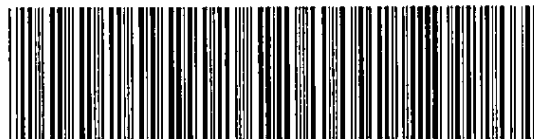
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2023 MAR 24 AM 11:19

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CLERK OF STATE
TALLAHASSEE, FL

FILED

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

ACCOUNT NO. : I20000000195

REFERENCE : 609187 4304045

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : March 23, 2023

ORDER TIME : 8:18 AM

ORDER NO. : 609187-010

CUSTOMER NO: 4304045

FOREIGN FILINGS

NAME: AVPM FL PC 19 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: AVPM FL PC 19 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:

Rebecca Saferstein

(Name of Person)

Arnall Golden Gregory LLP

(Firm/Company)

171 17th Street NW Suite 2100

(Address)

Atlanta, GA 30363

(City/State and Zip Code)

For further information concerning this matter, please call:

Rebecca Saferstein

(Name of Person)

404

870-5604

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

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- | | | | |
|--|---|--|--|
| <input 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 |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AVPM FL PC 19 LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

October 10, 2022

(Date registered with Florida Department of State)

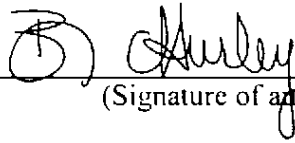
M22000015921

(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)

Brian Hurley, Sole Member

(Typed or printed name of signee)

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2023 MAR 24 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FL

Filing Fee: \$25.00