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| Special Instructions to F | -iling Officer:   |              |
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Office Use Only



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## **COVER LETTER**

| TO:                  | Registration Section Division of Corporations  |   |
|----------------------|--|---|
| SUBJE                | CCT: 80906 LLC<br>(Name of Foreign Limited Liability   | y Company)  |
| Dear Si              | ir or Madam:   |   |
| The en               | closed withdrawal and fee(s) are submitted for filing.   |   |
| Please               | return all correspondence concerning this matter to the following  | ing:  |
|                      | Daglas Whiting (Name of Person)  | <u>—</u>  |
| <del></del>          | 80906 LLC<br>(Firm/Company)  | <u> </u>  |
| <u> </u>             | 8849 Foxtail Loop  |   |
|                      | Pensaco la Fl 32526<br>(City/State and Zip Code)   |   |
| For fu               | rther information concerning this matter, please call:   |   |
|                      | Name of Person)  at (7) (Area Cod  | 205-8307<br>e & Daytime Telephone Number)                 |
|                      | Mailing Address:   | Street Address:   |
|                      | Registration Section Division of Corporations  | Registration Section Division of Corporations             |
|                      | P.O. Box 6327  | The Centre of Tallahassee                                 |
|                      | Tallahassee, FL 32314  | 2415 N. Monroe Street, Suite 810<br>Tallahassee, FL 32303 |
| Enclo                | sed is a check for the following amount:   |   |
| Ser<br>Ser<br>urlies | sed is a check for the following amount:  5 Filing Fee S30 Filing Fee & S55 Filing Fee Certificate of Status Certified Copy  Table |   |
| •                    |  |   |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| (Name of limited liability company)  |   |
|--|---|
| (Name of limited liability company)  |   |
| (Jurisdiction of its organization)   |   |
| (Date registered with Florida Department of State)   |   |
| M 220000 1S9 89<br>(Florida Document Number)   |   |
| This limited liability company is withdrawing its certificate of authority in this s   |   |
| Effective Date, if other than the date of filing: April 30 2023 (If an effective date is listed, the date must be specific and cannot be prior to dat more than 90 days after filing.)  Note: If the date inserted in this block does not meet the applicable statutory filithis date will not be listed as the document's effective date on the Department of | ing requirements,                                 |
| Loce Matrix  |   |
| (Signature of authorized representative)  Typed or printed name of signee)   | 2023 AUG - 7 PP<br>SECRETARY OF<br>TALL ALIASSEE. |
|  | PR I:I  |

Filing Fee: \$25.00