M13000005553

(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
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	Document Number)	
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Special Instructions to F	Filing Officer:	
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Office Use Only



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LLC Withdrawd





A. RAMSEY AUG - 3 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 914979 8328710

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : August 1, 2023

ORDER TIME : 8:37 AM

ORDER NO. : 914979-005

CUSTOMER NO: 8328710

FOREIGN FILINGS

NAME: WTWH BUYER, 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

то:			Section Corporations		
SUBJEC		WTW	H Buyer LLC		
SOBOL	··· _		(Name of I	oreign Limited Liability	(Company)
Dear Sir	or M	adam:			
The encl	losed	withdra	awal and fee(s) are submi	tted for filing.	
Please re	eturn a	ıll corr	espondence concerning th	nis matter to the followin	ह:
Brian K	(orsbe	erg			
			(Name of Person)		_
Design	Worl	d LLC			
•			(Firm/Company)		_
1111 S	uperi	or Ave	nue E STE 2600		
			(Address)		_
Clevela	ınd, C)H 441	114		
			(City/State and Zip C	ode)	_
For furth	ner inf	ormati	on concerning this matter	, please call:	
Brian K	lorsbe	er		408 at (701-7926
		(Na	ime of Person)	(Area Code &	& Daytime Telephone Number)
	Regi Divi P.O.	sion c Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed	d is a	check	for the following amoun	ıt:	
□\$25 F	iling l	Fee	S30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

FILED 2023 AUG -2 AM 9: 47

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

WTWH Buyer l	LC
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
04/28/2023	
	(Date registered with Florida Department of State)
M2300000555	3
	(Florida Document Number)
(If an effective more than 90 c Note: If the da	if other than the date of filing:
	Brian Korsberg (Signature of authorized representative)
	Brian Korsberg (Typed or printed name of signee)

Filing Fee: \$25.00