

M23000005599

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

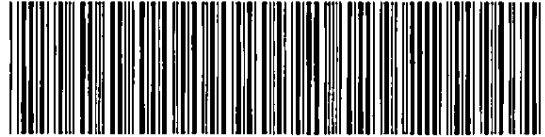
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800422958348

02/05/24--01011--023 **25.00

2024 FEB -5 PM 1:43
OFFICE OF THE CLERK
STATE OF NEW YORK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2203 College Park 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:

Jamie Denney
(Name of Person)

2203 College Park LLC
(Firm/Company)

2 Foxhill Ln.
(Address)

Wilmington DE. 19807
(City/State and Zip Code)

For further information concerning this matter, please call:

Jamie Denney at (302) 521-7802
(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:

☒ \$25 Filing Fee ☐ \$30 Filing Fee & ☐ \$55 Filing Fee & ☐ \$60 Filing Fee,

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

2203 College Park LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

4/27/23

(Date registered with Florida Department of State)

M23000005599 / W22000129528

(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: 6/1/23 (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)

John Jenney III (Jamie)

(Typed or printed name of signee)

Filing Fee: \$25.00