

M23 00000 7328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

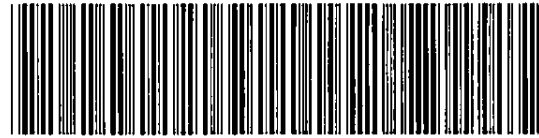
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300425746473

2024 MAR 15 AM 9:06  
FLORIDA STATE  
OFFICE, FL

10

R. HUNT

03/15/24

2024 MAR 15 AM 11:13

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE

BY



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext:

To: Department Of State, Division Of Corporations  
From: Amanda Miller  
Ext:  
Date: 03/15/24  
Order #: 1449915-2  
Re: Sfg Palmetto I, LLC  
Processing Method: Routine

3D  
MAR 15 AM 9:06  
DEPT OF STATE  
TALLAHASSEE, FL

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

Application for Certificate of Authority

Amount to be deducted from our State Account: \$35.00 - FL State Account Number:

I20000000195

AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SFG Palmetto I, 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:

Hannah Hope

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

Stonemont Financial Group

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

3280 Peachtree Road NE, Suite 2770

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

Atlanta, GA 30305

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

For further information concerning this matter, please call:

Trish Herron

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

704

243-5639

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

APR 15 AM 9:06  
DIVISION OF STATE  
CORPORATIONS, FL

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SFG Palmetto I, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

June 6, 2023

(Date registered with Florida Department of State)

M23000007328

(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)

William I. Markwell, III

(Typed or printed name of signee)

2023 JUN 15 AM 9:06  
CLERK OF STATE  
TALLAHASSEE, FL

**Filing Fee: \$25.00**