

m23000012240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

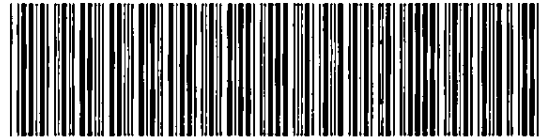
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DATE: 12/30/2024

NAME: 21TECH LLC

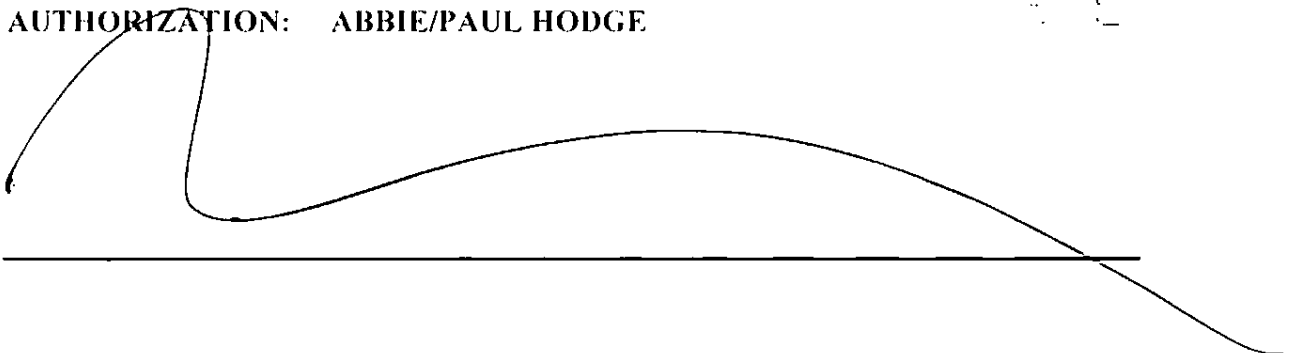
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File 187

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

2ITECH LLC

(Name of limited liability company)

California

(Jurisdiction of its organization)

09-08/2023

(Date registered with Florida Department of State)

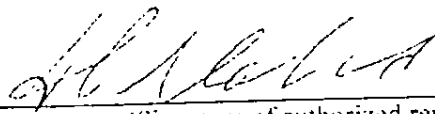
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(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
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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)

Azhar Mahmood

(Typed or printed name of signee)

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