

M23000014880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

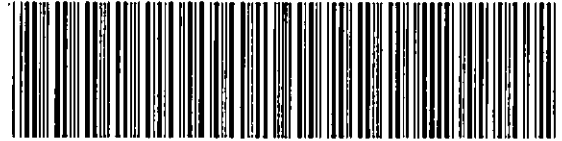
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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5. PLANT
6/25/24

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 05/29/2024

****WALK IN****

ENTITY NAME CHF – UnionWest, L.L.C.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$25

ACCOUNT #: I20160000072

S. R. H/O

Please call Tina at the above number for any issues or concerns. Thank you so much!

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CHF-UnionWest, L.L.C.

(Name of limited liability company)

Alabama

(Jurisdiction of its organization)

November 21, 2023

(Date registered with Florida Department of State)

M23000014880

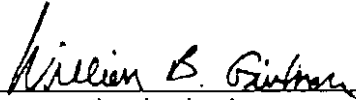
(Florida Document Number)

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 B. Givhan, President of Collegiate Housing Foundation, sole member
of CHF-UnionWest, L.L.C.

(Typed or printed name of signee)

Filing Fee: \$25.00