M24000007762

(Requestor's Name)					
(Adams)					
(Address)					
(Address)					
	(City/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
Ш					
(Business Entity Name)					
	(,				
	(Document Number)				
Certified Copies	Certificates of Status				
 					
Special Instructions to Filing Officer:					
J D.E. (1733)					
$\mathcal{K}^{*}\mathfrak{I} = \mathcal{E}^{*}\mathfrak{I}^{*}\mathfrak{I}^{*}$					

Office Use Only



700434195747

62 :11.7 5- 2.7.7 7

PIN AUG-6 PH 4: 16

CENTRUS - SUN FIRE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

FAIR PROPERTY BUYER LLC	
(Name of limited liability company)	
CA	
(Jurisdiction of its organization)	
06/17/2024	
(Date registered with Florida Department of State)	
M2400007762	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this st	tate.
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing this date will not be listed as the document's effective date on the Department of	ng requirements,
(Signature of authorized representative)	
Gabe Cole	
(Typed or printed name of signee)	င်
	= ::

Filing Fee: \$25.00

COVER LETTER

	Registration Division of	Section Corporations				
SUBJEC	Т:	FAIR PROPERTY BUYER LLC				
3020		(Name of For	eign Limited Liability (Company)		
Dear Sir o	or Madam:					
The enclo	sed withdra	wal and fee(s) are submitted	for filing.			
Please ret	urn all corre	espondence concerning this	matter to the following:			
		Joseph Chin				
		(Name of Person)				
	FAIF	R PROPERTY BUYE	R LLC			
		(Firm/Company)				
	24	00 Barranca Pkwy #2	2506			
		(Address)				
		Irvine, CA 92606				
		(City/State and Zip Code	c)			
For further	er informati	on concerning this matter, p	lease call:			
	(Gabe Cole	at (949	533-7157		
	(Na	ume of Person)	(Area Code &	Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section				
Division of Corporations		Divisio	Division of Corporations P.O. Box 6327			
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 32314				
		Florida 32301				
Enclosed	is a check	for the following amount:				
□ \$ 25 Fi	ling Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		