MARCOCCUIUM

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
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18 JAN 22 AM 1: 15 SECRETARY OF STATE 20 FALLAHASSEE FLORIDA

D. SCOTT AM 2 5 1918



January 23, 2018

CSC

SUBJECT: GROVE OCEAN LLC Ref. Number: M99000001149

RESUBMIT

Please give original submission date as file date.

We have received your document for GROVE OCEAN LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN CORP, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 418A00001414

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195
		•	

REFERENCE : 034526 7164167

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: January 22, 2018

ORDER TIME : 12:45 PM

ORDER NO. : 034526-010

CUSTOMER NO: 7164167

FOREIGN FILINGS

NAME: GROVE OCEAN LLC

CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER:

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

		GKC	JVE OCEA	N LLC			
-	<u> </u>	(Name of I	imited liabi	lity compan	y)		
		S	State of Dela	ware			
		(Jurisdict	ion of its o	rganization)	<u> </u>		
			July 19, 19	99			
	(Date	registered w	ith Florida	Department	of State)	<u>-</u>	
		ı	M99000001	149			
		(Florida	a Documen	t Number)			
This limited lia	bility company	is withdraw	ing its cer	tificate of a	uthority in t	this state.	
more than 90 da Note: If the dat	date is listed, th ays after filing.) e inserted in this of be listed as th	s block does	s not meet	the applica	ible statutor	y filing require	ements,
-		Signature o	Dula of authoriz		tative)		
		•		Vice Presider	•	C	
-		(Typed o	r printed r	name of sign	nee)	I.,	2 :

Filing Fee: \$25.00