

M22 000008327

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

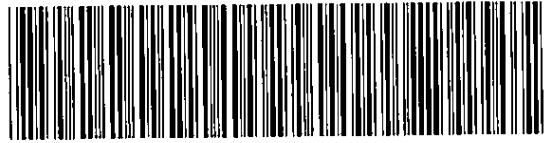
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800405618498

FILED
2023 APR -4 AM 9:42
TALLAHASSEE, FL
SECRETARY OF STATE

RECEIVED
2023 APR -4 PM 1:59
TALLAHASSEE, FLORIDA
REGISTRATION OFFICE

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 04/04/2023

****WALK IN****

ENTITY NAME St Pete 1211 Owner LLC

DOCUMENT NUMBER _____

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

XXXXXX

- Plain Copy*
- Certified Copy*
- Certificate of Status*

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

- Certified Copy of Arts & Amendments*
- Certified Copy of Arts & Amendments Complete File (Including Annual Reports)*
- Certificate of Status*
- Certificate of Status Reflecting: _____*

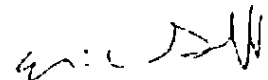
****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 35.00 25.00

ACCOUNT # 120160000072



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

FILED

2023 APR -4 AM 9:42

SECRETARY OF STATE
TALLAHASSEE, FL

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

St Pete 1211 Owner LLC

Assistant Secretary (~~Name of limited liability company~~) Asset Management LLC, mgr.

Delaware

(Jurisdiction of its organization)

May 26, 2022

(Date registered with Florida Department of State)

M22000008327

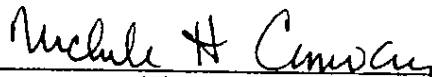
(Florida Document Number)

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)

Michele H Conway

(Typed or printed name of signee)

Filing Fee: \$25.00