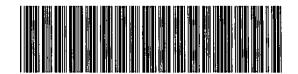
(Re	equestor's Name)			
(Ac	ldress)			
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## COVER LETTER

TO: Registration Division of	Section Corporations		
	EBA, LLC *		
SUBJECT:	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitte	ed for filing.	
Please return all corr	espondence concerning this	matter to the followin	g:
Luke Widmer			
	(Name of Person)		
American Mana	agement Specialists		
	(Firm/Company)		<u></u>
P.O. Box 69-20	49		
	(Address)		<del></del>
Orlando, FL 32	869		
	(City/State and Zip Coo	de)	_
For further informati	on concerning this matter, p	olease call:	
Luke Widmer		407	468-9701
(N	ame of Person)	at ( (Area Code o	)
		·	
	COURIER ADDRESS:	MAILING ADDRESS:	
Registration	i Section Corporations	Registration Section Division of Corporations	
Clifton Buil	•	P.O. Box 6327	
	tive Center Circle , Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:		
■ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

2202 EBA, LLC				
	(Name of limited liability company)	· · ·		
Delaware				
	(Jurisdiction of its organization)			
January 15, 2015				
(Dat	te registered with Florida Department of State)	<del></del>	<del></del>	—
M15000000397				
	(Florida Document Number)			_
This limited liability company	y is withdrawing its certificate of authority in thi	is state.		
Luke Widme	(Signature of authorized representative)		16 MAR IN ANII	- - - - - -
			•••	
	(Typed or printed name of signee)		Ø	

Filing Fee: \$25.00