

MD2 0000001136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

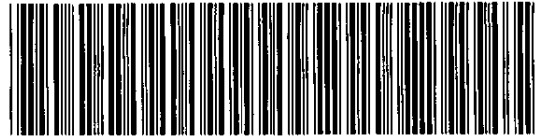
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
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2014 AUG 12 PM 3:49  
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2014 AUG 12 AM 10:49  
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AUG 13 2014  
J. BRUCE

CT

August 12, 2014

Department of State, Florida  
Clifton Building  
2611 Executive Center Circle  
Tallahassee FL 32301

Re: Order #: 9233832 SO  
Customer Reference 1: None Given  
Customer Reference 2: None Given

File 1st

Dear Department of State, Florida :

Please obtain the following:

AMPARTS MANAGEMENT, LLC (TX)  
Cancellation  
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092 .

Thank you very much for your help.

Sincerely,

Connie R Bryan  
Senior Fulfillment Specialist  
Connie.Bryan@wolterskluwer.com

FILED  
2014 AUG 12 AM 10:49  
DEPT OF STATE  
TALLAHASSEE FL 32301

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AMPART'S MANAGEMENT, LLC

(Name of limited liability company)

TEXAS

(Jurisdiction of its organization)

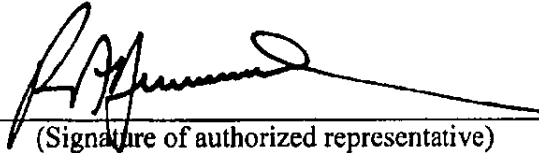
5/3/02

(Date registered with Florida Department of State)

M02000001136

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Rodolfo A. Duemichen

(Typed or printed name of signee)

Filing Fee: \$25.00

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2014 AUG 12 AM 10:49  
CLERK OF STATE  
TALLAHASSEE FLORIDA