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(R	equestor's Name)
(A	daress)
A)	ddress)
	ity/State/Zip/Phone #)
PICK-UP	
(В	usiness Entity Name)
(C	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	Office Use Only



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	ACCOUNT NO.	:	12000000019	95
	REFERENCE	:	516672	7288091
	AUTHORIZATION	: (Spretsele	Man
	COST LIMIT	:	\$ 25.00	
ORDER DATE :	February 25, 2019	5		
ORDER TIME :	10:11 AM			
ORDER NO. :	516672-005			
CUSTOMER NO:	7288091			

-

FOREIGN FILINGS

NAME: TEACHERS REA III, LLC

CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY

:

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XXXX WITHDRAWAL/CANCELLATION

1

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF STATUS

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations

TEACHERS REA III, LLC

SUBJECT:

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(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna Cohen

(Name of Person)

TIAA-CREF

(Firm/Company)

730 Third Avenue

(Address)

New York, NY 10017

(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Cohen		212	490-9000	
(Name of Person)		at () (Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32314		
Tallahassee	e, Florida 32301			
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

TEACHERS REA III, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

August 13, 2003

(Date registered with Florida Department of State)

M0300002698

(Florida Document Number)

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

(Signature of authorized representative)

Donna Cohen, Assistante Berestany

(Typed or printed name of signee)

FillED 15 FEB 26 M 8: 41

Filing Fee: \$25.00