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SECRETARY OF STATE

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COVER LETTER

TO: Registration Division of C			
SUBJECT:	Computation (Name of For	na/ //y/yau// reign Limited Liability (CS and Transport LUC Company)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	d for filing.	
Please return ail corre	espondence concerning this	matter to the following:	
Micha	8/ Traw/e (Name of Person)		
Computat	(Firm/Company)	s = Transport	/
912 S	paring Way (Address)		
Mariet	City/State and Zip Cod	8 <i>4062</i> (e)	
For further information	on concerning this matter, p	lease call:	
Michael (Na	Trawle me of Person)	at (<u>6</u>)/ (Area Code &)
Registration Division of C Clifton Build 2661 Execut	Corporations	Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations lox 6327 assee, Florida 32314
Enclosed is a check	for the following amount:		
□ \$25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Computational Hydraulics and Transport, LLC (Name of simited liability company)
(Name of Imited liability company)
MISSISSIP II (Jurisdiction of its organization)
02/02/2007 (Date registered with Florida Department of State)
(Date registered with Florida Department of State)
M Ø 7 Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø Ø
(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:
(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.
Michael David
(Signature of authorized representative)
Michael J. Trawle
(Typed or printed name of signee)

BECRETARY OF STATE SOUNDER CORPORATIONS OF FRENCH PM 2:59

Filing Fee: \$25.00