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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Polar Bear Management, LLC	
(Name of Foreig	gn Limited Liability Company)
Dear Sir or Madam:	
The enclosed withdrawal and fee(s) are submitted if	for filing.
Please return all correspondence concerning this m	atter to the following:
Tam T. Ho, Esq.	
(Name of Person)	
McElroy, Deutsch, Mulvaney & Carpe	enter, LLP
(Firm/Company)	
1300 Mount Kemble Avenue	
(Address)	
Morristown, New Jersey 07962-2079	5
(City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Tam T. Ho, Esq.	at (_ 973 425-4164
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS;
Registration Section Division of Corporations	Registration Section  Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, 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 & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

Polar Bear Management, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
100 Polar Way
(Mailing address)
Jersey City, New Jersey 07305
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of member or authorized representative of a member)
Tam T. Ho, Esq.
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED

10 FEB -5 PM 2: 15

SECRETARY OF STATE
ANASSEF, FLORIDA