M08000002929

(Requestor's Name)					
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COVER LETTER

Division of Corporations					
SUBJECT: N	Jewman A	rchitects IIC			
SUBJECT: <u>F</u>	- Willan A		eign Limited Liability (Company)	
Dear Sir or Ma	dam:				
The enclosed w	vithdrawal	and fee(s) are submitted	d for filing.		
Please return al	ll correspo	ndence concerning this	matter to the following	:	
Herbert S. Nev	wman				
		(Name of Person)			
		<u>-</u>			
Newman Arch	iitects, LL	(Firm/Company)			
		(t mil company)			
300 York Stree	et				
	•	(Address)		•	
New Haven, C	CT 06511				
(City/State and Zip Code)					
For further info	ormation c	oncerning this matter, p	lease call:		
	Jingnon C	oncerning this matter, p			
Mavis Terry			203 at (772-1990)	
	(Name o	of Person)	(Area Code &	Daytime Telephone Number)	
STRE	EET/COU	RIER ADDRESS:	MAIL	ING ADDRESS:	
Registration Section		Registration Section			
Division of Corporations		Division of Corporations P.O. Box 6327			
Clifton Building 2661 Executive Center Circle		Tallahassee, Florida 32314			
Tallahassee, Florida 32301					
Enclosed is a	check for	the following amount:			
\$25 Filing F	ee □	\$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

TO:

Registration Section

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Newman Architects, LLC
(Name of limited liability company)
Connecticut
(Jurisdiction of its organization)
06/19/2008
(Date registered with Florida Department of State)
M08000002929
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Webent Sum
(Signature of authorized representative)
Herbert S. Newman
(Typed or printed name of signee)

Filing Fee: \$25.00