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**S** Warren SEP 21 2016

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 297000 \_ 7448543

AUTHORIZATION : Spelle le man

COST LIMIT : \$ 25.00

ORDER DATE: September 20, 2016

ORDER TIME : 11:33 AM

ORDER NO. : 297000-005

CUSTOMER NO: 7448543

## FOREIGN FILINGS

NAME: TFM OF NEW YORK, LLC -

\_ CORPORATE \_\_LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

## **COVER LETTER**

	egistration ivision of (	Section Corporations		
SUBJECT	. TFM (	OF NEW YORK, LLC		
ocourc i	•	(Name of Fore	eign Limited Liability (	Company)
Dear Sir or	Madam:			
The enclos	ed withdra	wal and fee(s) are submitted	l for filing.	
Please retu	rn all corre	spondence concerning this	matter to the following:	:
Kevin M	I. Kinney	, Counsel		
		(Name of Person)		
Benders	son Dev	elopment Company, l	LLC	
		(Firm/Company)		
7978 C	ooper Ci	reek Blvd., Suite 100		
		(Address)		•
Univers	ity Park,	FL 34201		
		(City/State and Zip Code	:)	
For further	· informatio	on concerning this matter, pl	ease call:	
Kevin M	1. Kinne	/	941	359-8303
	(Na	me of Person)	(Area Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed	is a check	for the following amount:		
□ <b>\$</b> 25 Fili	ing 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

TEM OF NEW YORK, LLC
(Name of limited liability company)
New York
(Jurisdiction of its organization)
07/07/2008
(Date registered with Florida Department of State)
M08000003174
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative) imited pavid H. Baldauf, Manager
(Typed or printed name of signce)

Filing Fee: \$25.00

FILED

NIN PRO A 2: 22

NORETARY OF STATE