

M10000002088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

JUL 20 2011

EXAMINER



400209829024

07/19/11--01018--003 \*\*75.00

FILED  
JUL 19 PM 1:25  
CLERK OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NBI Consultants, LLC  
(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:

J. Weisbrot  
(Name of Person)

NBI Consultants, LLC  
(Firm/Company)

110 wall street, 11th floor  
(Address)

new york, ny 10005  
(City/State and Zip Code)

For further information concerning this matter, please call:

J. Weisbrot at (800) 385-1247  
(Name 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:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

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

NBI Consultants, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M10000002088

(Florida Document Number)

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.

110 wall street, 11th floor

(Mailing address)

new york, ny 10005

(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)

Juliya Weisbrot

(Typed or printed name of signee)

**FILED**  
11 JUL 19 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Filing Fee: \$25.00**