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(Requestor's Name)	
(Address)	
(Address)	<u>. </u>
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PICK-UP WAIT	MAIL
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TALBALESSEE BORIDA

18 JAN 26 AM 8: 41

S. WARREN JAN 2 9 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 041542 5140915 AUTHORIZATION COST LIMIT ORDER DATE : January 26, 2018 ORDER TIME : 12:14 PM ORDER NO. : 041542-020 CUSTOMER NO: 5140915 FOREIGN FILINGS NAME: TWC ADMINISTRATION LLC CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

COVER LETTER

	on Section of Corporations		
SUBJECT:	TWC Administration LL	.c	
	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madar	n:		
The enclosed with	drawal and fee(s) are submitte	ed for filing.	
Please return all co	orrespondence concerning this	matter to the following	3:
Cindy Minahan			
	(Name of Person)		-
TWC Administrat	ion LLC		
	(Fini/Company)		-
12405 Powerscou	rt Drive		
	(Address)		-
St. Louis, MO 63	131		
	(City/State and Zip Cod	le)	-
For further informa	ation concerning this matter, p	lcase call:	
Cindy Minahan		314 at (965-0555
(Name of Person)		Daytime Telephone Number)
Registrati Division o Clifton B 2661 Exe	/COURIER ADDRESS: on Section of Corporations ailding cutive Center Circle ce, Florida 32301	Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314
Enclosed is a chec	k for the following amount:		
□ \$25 Filing 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

TWC Administration LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
8/2/2012	
(Date registered with Florida Department of State)	
M120000(4357	
(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: (optional	.)
If an effective date is listed, the date must be specific and cannot be prior to date of filing or nore than 90 days after filing.)	٢
Note: If the date inserted in this block does not meet the applicable statutory filing requirem his date will not be listed as the document's effective date on the Department of State's received.	
Kutta-fill	
(Signature of authorized representative)	
Daniel J. Bollinger, VP, Assoc. Gen. Counsel, Assistant Secretary	
(Typed or printed name of signee)	
of Charter Communication; Inc., the Manager	

Filing Fee: \$25.00

18 JAN 26 AM 8: 41