M1200	0006243	
(Requestor's Name)		
(Address) (Address)	700259093457	
(City/State/Zip/Phone #)	04/21/1401029013 **25.00	
(Document Number) Certified Copies Certificates of Status	FIL 2014 APR 2 SECRETARY TALLAHASS	
Special Instructions to Filing Officer:	ED OFSTATE FLORIDA	
Office Use Only		

e

COVER LETTER

TO: Registration Section Division of Corporations

Letarte Palm Beach, LLC

SUBJECT:

.

(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:

Kathy Wyckoff

(Name of Person)

Letarte Retail, LLC

(Firm/Company)

160 Carter Henry Drive

(Address)

Fairfield, CT 06824

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathy Wyckoff		203	372-8 301	
(Name of Person)		(Area Code & Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section		
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314		
Enclosed is a check	for the following amount:	:		
2 \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy	

FILED 2014 APR 21 PM 12: 24 SECRETARY OF STATE TALLAHASSEE, FLORIDA

÷

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Letarte Palm Beach, LLC

(Name of limited liability company)

Connecticut

(Jurisdiction of its organization)

11/6/12

•

(Date registered with Florida Department of State)

M1200006243

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

(Signature of authorized representative)

Michele Ross

(Typed or printed name of signee)

Filing Fee: \$25.00