8PP COCOPIN

(Re	equestor's Name)			
(A	ddress)			
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COVER LETTER

TO:	Registration of Contraction Contraction (Contraction)	on Section of Corporations		
CUD IE		77 ECC, LLC		
SUBJEC	JI:	(Name of Fo	reign Limited Liability (Company)
Dear Sir	or Madam	ı:		
The encl	osed with	drawal and fee(s) are submitte	ed for filing.	
Please re	eturn all co	rrespondence concerning this	matter to the following	:
LUKE	WIDME	:R		
		(Name of Person)	·	
AMER	RICAN M	MANAGEMENT SPEC	IALISTS, LLC	
		(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
РО В	OX 69-2	049		
		(Address)		
ORLA	NDO, F	L 32869		
		(City/State and Zip Coo	de)	-
For furth	ner informa	ation concerning this matter, p	olease call:	
LUKE	WIDME	:R	407	468-9701
	(Name of Person)	at ((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		
Enclose	d is a chec	k for the following amount:	:	
☑ \$25 F	iling 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

10077 ECC, LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
JANUARY 27,2014
(Date registered with Florida Department of State)
M1400000498
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)
LUKE WIDMER

Filing Fee: \$25.00

(Typed or printed name of signee)