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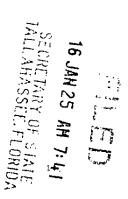
(Re	equestor's Name)			
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## COVER LETTER -

TO:

<b>ΓO:</b> Registration Division of C	Section Corporations		
Minute	emen Asset Manage	ment LLC	
30101.61.	(Name of For	eign Limited Liability (	Company)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitte	d for filing.	
Please return all corre	espondence concerning this	matter to the following:	
Robert W. Richa	erd		
	(Name of Person)	<u> </u>	•
Minutemen Ass	et Management LLC		
	(Firm/Company)		
6017 Pine Ridg	e Rd PMB 255		
	(Address)		
Naples, FL 341	19		
	(City/State and Zip Cod	e)	
For further information	on concerning this matter, p	lease call:	
Robert W. Richa	ard	239 at (	298-2828
(Na	ime of Person)	(Area Code &	Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations 80x 6327 assee, Florida 32314
Enclosed is a check	for the following amount:		
■ \$25 Filling Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fec. Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Minutemen Asset Management LLC		
(Name of limited liability company)		_
FL		
(Jurisdiction of its organization)		_
12/30/2014		
(Date registered with Florida Department of State)		_
M1500000308		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.    Box   Manager   Manager     (Signature of authorized representative)		,
ROBERT W. RICHARD ES	_	
(Typed or printed name of signee)  CAHASSEE, FLORID	16 JAN 25 AM 7: 41	Control of the second

Filing Fee: \$25.00