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	istration S ision of Co	ection orporations		•	•		
SUBJECT:	AMBA Management, LLC						
SOBJECT.		(Name of Foreign Limited Liability Company)					
Dear Sir or M	Madam:						
The enclosed	l withdraw	al and fee(s) are submitted	l for filing.				
Please return	all corres	pondence concerning this	matter to the foll	owing:			
Jenny Ba	stin						
		(Name of Person)					
Association	on Mem	ber Benefits Adviso	rs, LLC				
		(Firm/Company)					
6304 W.	Courtya	rd Dr., Suite 300					
		(Address)					
Austin, T	X 78730						
		(City/State and Zip Code	e)				
For further in	nformation	n concerning this matter, pl	lease call:				
Mark Mo	yer		512	`	657-2786		
•	(Nan	ne of Person)		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		ation Section on of Corporations ox 6327			
Enclosed is	a check fo	or the following amount:					
□ \$25 Filing	g Fee	\$30 Filing Fee & Certificate of Status	S55 Filing F Certified Co		□ \$60 Filing Fee, Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

AMBA Management, LLC
(Name of limited liability company)
Texas
(Jurisdiction of its organization)
10/18/2016
(Date registered with Florida Department of State)
M16000008333
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Jerry Morgan
(Typed or printed name of signee)

Filing Fee: \$25.00

MECRETARY OF STATE