## M1800000 6446

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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R. WHITE
JAN 02 2020

## **COVER LETTER**

Division of C				•			
SUBJECT:	TIA Group, LLC						
30b3EC1.	(Name of Fore	ign Limited	I Liability	Comp	nany)		—
Dear Sir or Madam:							
The enclosed withdra	wal and fee(s) are submitted	for filing.					
Please return all corre	spondence concerning this n	natter to the	2 followin	g:			
	John W. Diggs I	1					
	(Name of Person)			<del></del>			
	TIA Group, LLC	;					
	(Firm/Company)			_			
800	0 IH-10W, Ste	950					
	(Address)			_			
San	Antonio, TX 78 (City/State and Zip Code)			_			
For further information	n concerning this matter, ple	ase call:					
Jo	hn W. Diggs II	at (	210	_)		428-2504	
(Na	ne of Person)	(2	Vrea Code v	& Dayt	ime Te	lephone 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				
Enclosed is a check t	or the following amount:						
X   \$25 Filing Fee	[\$30 Filing Fee & Certificate of Status				Certif	iling Fee, icate of Status & ied Copy	

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

TIA Group, LLC	
(Name of Timited liability company)	• •
Texas	
(Jurisdiction of its organization)	
7/13/18	
(Date registered with Florida Department of State)	
M18000006446	
(Florida Document Number)	
	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.)	filing or
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing r this date will not be listed as the document's effective date on the Department of Sta	
J.M.	
(Signature of afithórized representative)	7]
John W. Diggs II	చ్
(Typed or printed name of signee)	

Filing Fee: \$25.00