

# M190000000697

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 140 LLC  
\_\_\_\_\_  
(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:

Nechama Cohen

\_\_\_\_\_  
(Name of Person)

140 LLC

\_\_\_\_\_  
(Firm/Company)

10800 Biscayne Blvd., Suite 600

\_\_\_\_\_  
(Address)

Miami, FL 33161

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nechama Cohen

305

864-9191

at (

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_) \_\_\_\_\_  
(Area Code & Daytime Telephone Number)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

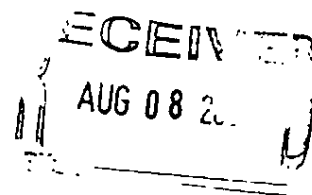


FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 21, 2024

NECHAMA COHEN  
10800 BISCAYNE BLVD.  
SUITE 600  
MIAMI, FL 33161

SUBJECT: 140 LLC  
Ref. Number: M19000000697



We have received your document for 140 LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FOREIGN LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 124A00013599

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

140 LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

January 17, 2019

(Date registered with Florida Department of State)


M19000000697

(Florida Document Number)

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

  
(Signature of authorized representative)

Abraham Shaulson

(Typed or printed name of signee)

TALLAHASSEE, FLORIDA

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