

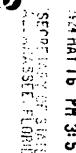
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DBARCE

COVER LETTER

TO: Registration Division o	on Section f Corporations		
TAP SUBJECT:	Distribution, LLC.		
	(Name of Fo	reign Limited Liability	(Company)
Dear Sir or Madam	:		
The enclosed withd	rawal and fee(s) are submitte	ed for filing.	
Please return all cor	respondence concerning this	s matter to the following	ığ:
Maryann Fusaro			
	(Name of Person)		•••
TAP Distributtion,	LLC		
**	(Firm/Company)		_
c/o 44 Bond St.			
	(Address)		_
Westbury, New Ye	ork 11590		
	(City/State and Zip Coc	le)	_
For further informat	ion concerning this matter, p	olease catl:	
Maryann Fusaro		516	876-0100
(7)	ame of Person)	(Area Code &	© Daytime Telephone Numberi
Division P.O. Box	ion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassec 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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

TAP Distribtution, LLC		
(Name of limited liability company)		
New York		
(Jurisdiction of its organization)		
9/10/2019		
(Date registered with Florida Department of State)		
M19000008695		
(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: (If an effective date is listed, the date must be specific and cannot be prior to dath more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filth this date will not be listed as the document's effective date on the Department of Signature of authorized representative)	ing requiremen	ts. is.
Maryann Fusaro AP	2024 MA SEO Tall	
(Typed or printed name of signce)	2024 HAY I 6 PH I2: 37 SEC: JACLY OF STATE TALLAHASSEF, FL	FILED

Filing Fee: \$25.00