

M080000000161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

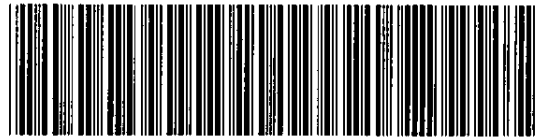
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

09 FEB 23 AM 8:30

FILED

DISERIO MARTIN O'CONNOR & CASTIGLIONI LLP

ATTORNEYS AT LAW

35 MASON STREET
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THE GRAYBAR BUILDING
420 LEXINGTON AVENUE
NEW YORK, NY 10170
TELEPHONE: (212) 616-3094

Rosa DiPreta
rdipreta@dmoc.com

February 20, 2009

VIA FEDERAL EXPRESS

Florida Department of State
Divisions of Corporations - Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: 1492 Associates, LLC

Dear Sir or Madam:

Enclosed is an Application for Withdrawal of Authority to Transact Business in Florida for 1492 Associates, LLC along with a check in the amount of \$60 (representing the \$25.00 Filing Fee, \$30.00 Certified Copy Fee and \$5.00 Certificate of Status Fee).

Upon filing, please forward to our office the certified copy of the Withdrawal and the Certificate of State in the self-addressed, stamped envelope provided for your convenience.

Thank you for your help in this matter. Please call us at (203) 358-0800 if you should have any questions.

Very truly yours,



Rosa DiPreta
Legal Assistant

/ms
Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1492 Associates, 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:

Laurence K. Hoffman
(Name of Person)

c/o Hoffman Investment Partners
(Firm/Company)

10 Middle Street, 7th Floor
(Address)

Bridgeport, CT 06604
(City/State and Zip Code)

For further information concerning this matter, please call:

Eric R. Sherman, Esq. at (203) 358-0800
(Name of Person) (Area 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

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

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

1492 Associates, LLC

(Name of limited liability company)

Connecticut

(Jurisdiction of its organization)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

c/o Hoffman Investment Partners

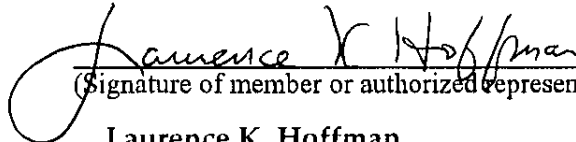
10 Middle Street, 7th Floor

(Mailing address)

Bridgeport, CT 06604

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.



(Signature of member or authorized representative of a member)

Laurence K. Hoffman

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
09 FEB 23 AM 8:30
TALLAHASSEE FLORIDA