

L09000030528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

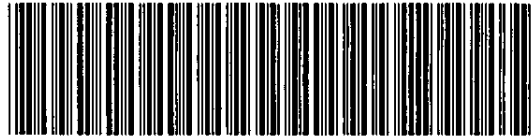
(Business Entity Name)

(Document Number)

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17 JUL 18 10 59 AM
STATE OF CALIFORNIA
SECRETARY OF STATE
DIVISION OF CORPORATIONS

C. LEWIS
JUL 31 2014
EXAMINER

***COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: GILLEN FAMILY, LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

PATRICIA GESSEL, ESQ
(Contact Person)

(Firm/Company)

99530 OVERSEAS HWY #2
(Address)

KEY LARGO FL 33037
(City/State and Zip Code)

For further information concerning this matter, please call:

PATRICIA GESSEL at (305) 453-5277
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
 \$25 Filing Fee \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

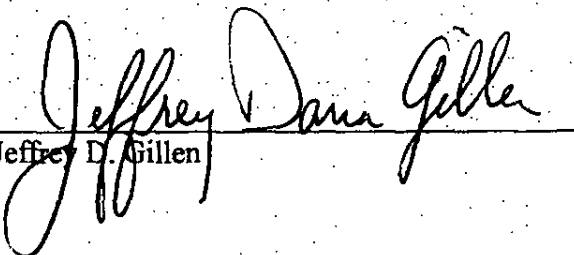
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

14 JUL 18 PM 12: 59

**RESIGNATION OF MEMBER
FROM GILLEN FAMILY, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is GILLEN FAMILY, LLC.
2. This limited liability company was organized under the laws of Florida.
3. The Florida document/registration number of this limited liability company is L09000030528.
4. I, Jeffrey D. Gillen, hereby resign as a member and managing member of this limited liability company and affirm the limited liability company has been notified of my resignation in writing by hand delivery of this resignation.

Dated this 10th day of June, 2014.


Jeffrey D. Gillen