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(Re	questor's Name)			
(Address)				
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
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M. MILLIGAN EXAMINER

AUG 27 2015

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: GUN M	ASTERS & PAWN,		
	(Name of Lin	nited Liability Con	npany)
The enclosed member	, resignation or dissoc	iation and fee(s) are submitted for filing.
Please return all corre	spondence concerning	this matter to:	
JIM COLLINS JR			
	(Contact Person)		-
GUN MASTERS &	PAWN, LLC		
	(Firm/Company)		-
4250 PERTH COU	₹T		
. ,	(Address)		-
NORTH FORT MYE	RS FL 33903		
(Ci	ty/State and Zip Code)		-
For further information	n concerning this mat	ter, please call:	
JIM COLLINS		239 at (910-5808
(Name of Co	ontact Person)		& Daytime Telephone Number)
Enclosed please find a	check made payable		Department of State for: Fee & Certified Copy
STREET/COURIER	ADDRESS:		MAILING ADDRESS:
Registration Section Division of Corporation	nne		Registration Section Division of Corporations
Clifton Building	ию		P.O. Box 6327
2661 Executive Cente	r Circle		Tallahassee, Florida 32314
Tallahassee, Florida 3	2301		,

CR2E079 (2/14)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as	s it appears on the records of the Florida Department
of State is:	MASTERS & PAWN LL	<u> </u>
2. The Florida docu	ument/registration number a	ssigned to this limited liability company is:
_L1000	0043213	,
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: 8/31/2015
		, hereby withdraw/resign as a
(Print N	ame of Person Resigning)	
MANAGING I	MEMBER	
·	(Print Title)	
of this limited lia resignation in wr	• •	ne limited liability company has been notified of my
Jen Co	ssociating Member or Resig	ming Manager
Signature of Di	ssociating Menioer of Resig	tunk manakei
Filing Fee:	\$25.00 (Required)	
	\$30.00 (Optional)	