11300033582

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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JAN 27 2016 BRUCE



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 it appears on the records of the Florida Department
	of State is: Investment Trust Title LLC.
	2. The Florida document/registration number assigned to this limited liability company is:
	L13000032582
	3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12 31 2015
	4. I, Kely Bookskin, hereby withdraw/resign as a (Print Name of Person Resigning)
	Manger + member. (Print Title)
	of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
/	DRIDA ORIDA
	Signature of Dissociating Member or Resigning Manager
	Filing Fee: \$25.00 (Required)
	Certified Conv. \$30.00 (Ontional)