

L14000018552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

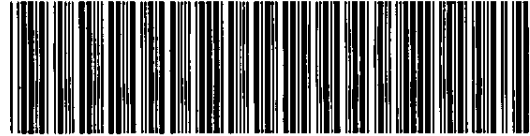
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 DEC 29 P 4: 17
SECRETARY OF STATE
PAT. ADMINISTRATION

FILED

B. BOSTICK
JAN 14 2015
EXAMINER

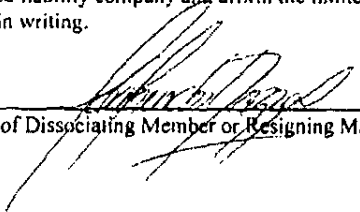


FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**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: CONVERLOGIC INTER LLC
2. The Florida document/registration number assigned to this limited liability company is:
L14000018552
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/31/2014
4. I, IDA L. MAZZA, hereby withdraw/resign as a
(Print Name of Person Resigning)
AMBR
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Dissociating Member or Resigning Manager

CR2E079 (2/14)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA