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DIVISION OF CORPARATIONS

K. SALY JAN - 9 ZO18

COVER LETTER

Division of Corporations BRICK AND MORTAR RECORDS LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fec(s) are submitted for filing. Please return all correspondence concerning this matter to: Gabriel E. Adam, Esquire (Contact Person) The Adam Law Firm, P.A. (Firm/Company) 111 E Lake Mary Blvd., Suite 107 (Address) Sanford, FL 32773 (City/State and Zip Code) For further information concerning this matter, please call: (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

MAILING ADDRESS:

Tallahassee, Florida 32314

Registration Section
Division of Corporations

P.O. Box 6327

CR2E079 (2/14)

111

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS:

TO:

Registration Section





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)

	e limited liability company as it appears on the records of the Florida Departmen
2. The Florida doc L1400173763	ument/registration number assigned to this limited liability company is:
JOHN DELA	ANEY, hereby withdraw/resign as a
Authorized M	lember
of this limited lia	(Print Title) ability company and affirm the limited liability company has been notified of my
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)