## L16 000147372

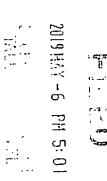
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R. WHITE

	CO	VER LETTER	_
	gistration Section vision of Corporations		•
SUBJECT	Decoding Technology L	LC	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		of Limited Liability Com	ipany)
The enclos	sed member, resignation or di	ssociation and fee(s)	) are submitted for filing.
Please retu	irn all correspondence concer-	ning this matter to:	
Nicander	Hildebrand		
	(Contact Person)		-
	(Firm/Company)		-
3135 La (	Costa Circle, Apt #101		
	(Address)		-
Naples, F	FL 34105		
	(City/State and Zip Code)		-
For further	r information concerning this	matter, please call:	
Nicander	Hildebrand	239 at (	450-2613
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed p	please find a check made paya ing Fee		epartment of State for: Fee & Certified Copy
Registration Division of Clifton Bu 2661 Exec	of Corporations		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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)

	e limited liability company as it appears on the records of the Florida Department oding Technology LLC
	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I. Philip Steine	
MBR	
	(Print Title)
resignation in wi	
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)