L16000200709

| (Re | questor's Name) | | | |
|---|-------------------|-------------|--|--|
| | | | | |
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE OF STATE OF CORPORATION

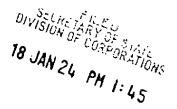
K SALY JAN 25 2018

COVER LETTER

| Division of Corporations | | |
|--|---------------------|--|
| SUBJECT: L16000200709 | | |
| | imited Liability Co | npany) |
| The enclosed member, resignation or disso | ciation and fee(| s) are submitted for filing. |
| Please return all correspondence concernin | g this matter to: | |
| JODI RONEN | | |
| (Contact Person) | | _ |
| JG CONSULTING SERVICES, LLC | | |
| (Firm/Company) | | |
| 5481 WILES RD STE 502 | | |
| (Address) | | _ |
| COOCNUT CREEK, FL 33073 | | |
| (City/State and Zip Code) | | _ |
| For further information concerning this ma | tter, please call: | |
| JODI RONEN | 754 | 220-8270 |
| (Name of Contact Person) | — | & Daytime Telephone Number) |
| Enclosed please find a check made payable \$25 Filing Fee | | Department of State for: g Fee & Certified Copy |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building | | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 |
| 2661 Executive Center Circle Tallahassee, Florida 32301 | | 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)

| | limited liability company as EWAY FOOD, LLC | it appears on the records of the Florida Department |
|--|---|---|
| 2. The Florida docu L16000200709 | · · | signed to this limited liability company is: |
| 3. The date this men | mber/manager withdrew/res | igned or will withdraw/resign is: |
| ERTAN REDI | Ω | , hereby withdraw/resign as a |
| MGR | | |
| | Print Title) | |
| of this limited liab resignation in wri | | e limited liability company has been notified of my |
| £ 1 | 45 | |
| Signature of Di | ssociating Member or Resig | ning Manager |
| | \$25.00 (Required) \$30.00 (Optional) | |