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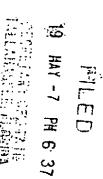
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O SIMMONS

## **COVER LETTER**

то:	Registration Section Division of Corporations		
SUBJ	ATHOL HOLDINGS LLC		
2, 2, 2, 0	(Name of Limited L	iability Com	pany)
The en	nclosed member, resignation or dissociation	and fee(s)	are submitted for filing.
Please	e return all correspondence concerning this	matter to:	
STEV	VEN STONEBRAKER		
	(Contact Person)		
ATH	OL HOLDINGS LLC		
	(Firm/Company)	-	-
315	S BROAD STREET		
	(Address)	•	-
EDE	NTON, NC 27932		
	(City/State and Zip Code)		-
For fu	arther information concerning this matter, p	lease call:	
STE	VEN STONEBRAKER	252	619-2999
			& Daytime Telephone Number)
	osed please find a check made payable to the 5 Filing Fee	e Florida D \$55 Filing	Department of State for: Fee & Certified Copy
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301		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)

4/1/2019 s:
as a
been notified of

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: