

118000135865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

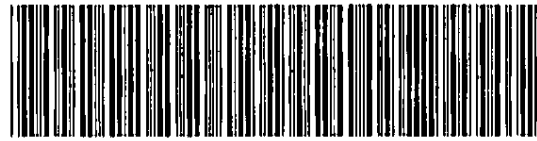
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200333411062

09/16/19 11:11:57 AM

2019 SEP 16 11:11:57 AM

Resignation

SEP 16 2019
ALBRITTON



2019. 5 A:111:51

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: BILLI-ON INVESTMENTS, LLC

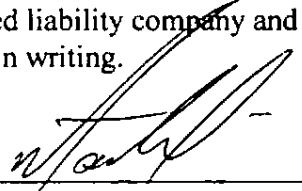
2. The Florida document/registration number assigned to this limited liability company is:
L18000135868

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/01/2019

4. I, MARCELLO GIANCOLI, hereby withdraw/resign as a
(Print Name of Person Resigning)

MANAGING MEMBER
(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

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)