## L00000000785

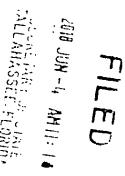
•		
(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
,		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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06/04/18--01024--024 \*\*50.00



## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Epoch Development, LLC			
(Name of Lim	ited Liability Company)		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to:		
Joanna Meyer			
(Contact Person)	·		
Epoch Development, LLC			
(Firm/Compuny)	-		
4951 Calypso Cay Way			
(Address)	<del></del>		
Kissimmee, FL 34746			
(City/State and Zip Code)	- <del></del>		
For further information concerning this matter, please call:			
Joanna Meyer	407 997-1668		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for:  2 \$25 Filing Fee			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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)

1. The name of the	e limited liability company as	it appears on the records of the Florida Department
of State is: Epo	och Development, LLC	·
2. The Florida doo	_	signed to this limited liability company is 200. 100. 100. 100. 100. 100. 100. 100.
3. The date this m	ember/manager withdrew/resi	gned or will withdraw/resign is:
1 II D		٠, ١٠٠٠
(Print :	Name of Person Resigning)	hereby withdraw/resign as a
Member		20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(Print Title)	i?* <b>634</b>
of this limited lia resignation in w	- · · · ·	e limited liability company has been notified of my
Signature of D	issociating Member or Resign	ing Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	_