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TO:

CR2E079 (2/14)

Registration Section

Division of Corporations Horizon Investments, LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Glenn Bridges (Contact Person) Horizon Investments, LLC (Firm/Company) 5201 31st Place SW (Address) Naples, Florida 34116 (City/State and Zip Code) For further information concerning this matter, please call: Glenn Bridges (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: MAILING ADDRESS: **Registration Section** Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



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)

of State is:	zon Investments, LLC			_•
2. The Florida doc L0200001969		ned to this limited liability company is:		
		ed or will withdraw/resign is:	16	-
4. I, Diane Bridge	98	_, hereby withdraw/resign as a		
(Print l	Vame of Person Resigning)	_ ,		
Member Part	ner			
	(Print Title)			
of this limited lia resignation in w		mited liability company has been notifie	ed of m	у
Diame	asabires			
	issociating Member or Resigning	g Manager	16 00.T	
Filing Fee:	\$25.00 (Required)		_	
Certified Copy:	\$30.00 (Optional)		AH III: 0	ALYNDAM ALYNDAM