L02000020519

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U5/U2/19--U1U16--U18 **25.UU



O SIMMONS

COVER LETTER

TO:	_	tration Section on of Corporations	V.	-(
		Quantum Leap Investme	ents. LLC			
SUBJ	JECT:					
		. (Name of E	innica Elability Con	.,		
The e	nclosed	member, resignation or disso	ociation and fee(s) are submitted for filing.		
Please	e return	all correspondence concernir	ng this matter to:			
Thop	nas Sat	ttler				
		(Contact Person)		-		
Quar	ntum Le	eap Investments, LLC				
		(Firm/Company)		-		
1517	74 84t h	Ave. N.				
		(Address)		_		
Palm	n Beach	Gardens, FL 33418				
		(City/State and Zip Code)		-		
For fu	urther in	formation concerning this ma	atter, please call:			
Tom	Sattler		(561)	491-3200		
	(Na	ame of Contact Person)	at ((Area Code	& Daytime Telephone Number)		
Enclo	sed plea	ase find a check made payabl	e to the Florida D	Department of State for:		
	5 Filing	• •		Fee & Certified Copy		
STR	EET/C(OURIER ADDRESS:		MAILING ADDRESS:		
_	stration :			Registration Section		
		Corporations .		Division of Corporations		
	on Build			P.O. Box 6327		
		ve Center Circle Florida 32301		Tallahassee, Florida 32314		
CRREO	179 (2/14)					



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER F FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY-

(Pursuant to 605.0216, Florida Statutes)

1. The name of th	e limited liability company as	s it appears on the records of the Florida Department
	uantum Leap Investments,	
2. The Florida do L02000020	•	ssigned to this limited liability company is:
		31 Dec 2017
	· ·	signed or will withdraw/resign is:
Andrea	Vargas-Sattler	, hereby withdraw/resign as a
4. I,	Name of Person Resigning)	, hereby withdrawnesign as a
	g Member .	
	(Print Title)	
of this limited li	ability eompany and affirm th	ne limited liability company has been notified of my
resignation in w	riting.	AX
	DI IN	
	/ J/ J/ J	
Signature of E	Sissociating Member or Resig	ning Manager
Filing Fee:	\$25.00 (Required)	·
Certified Copy:	\$30.00 (Optional)	

Certified Copy: