# L04000064615

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(Address)						
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## COVER LETTER

TO:	Registration Section Division of Corporations
SHR	VARTEK, L.L.C.
13 (C) 104)	Name of Limited Liability Company
DOC	UMENT NUMBER: 1.04000064675
The e for fil	nclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitteing.
Please	return all correspondence concerning this matter to the following:
CHRIS	STA RADULOVICH
	Name of Person
	Name of Firm/Company
36181	EAST LAKE RD., STE 25
	Address
PALM	HARBOR FLORIDA 34685
_	City/State and Zip Code
CR_SI	ERVICES@HOTMAIL.COM
E	-mail address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
CHRIS	TA RADULOVICH 727 938-0335 at (
	Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

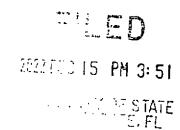
## Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303





## 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)

The name of the limited liability company as it appears on the reco     of State is:      VARTEK, L.L.C.	rds of the Florida Department
2. The Florida document/registration number assigned to this limited L04000064675	liability company is:
3. The date this member/manager withdrew/resigned or will withdraw  TWILA STARR PORTER  hereby withdray	
4. I,, hereby withdray (Print Name of Person Resigning)  MGR	
(Print Title)  of this limited liability company and affirm the limited liability comresignation in writing.	pany has been notified of my
Signature of Dissociating Member of Resigning Manager	ile Stan Partu
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	

$\mathbf{IN}$	THE	CIRCUIT	COURT	FOR	PASCO	COUNTY,
FLO	ORĐA			P	ROBATE	DIVISION
IN I	RE: G	UARDIANS	нір оғ			
TWILA STARR PORTER,			File No. 512020GA000118GAANES			
an i	ncapac	itated perso	o <b>n.</b>			

### LETTERS OF LIMITED GUARDIANSHIP OF THE PERSON AND PROPERTY

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#### TO ALLWHOM IT MAY CONCERN:

WHEREAS, CHRISTA RADULOVICH has been appointed Limited Guardian of the person and property of TWILA STARR PORTER and has taken the prescribed oath and performed all other acts prerequisite to issuance of Letters of Limited Guardianship of the Person and Property of the Ward.

NOW. THEREFORE, I. the undersigned Judge, declare CHRISTA RADULOVICH duly qualified under the laws of the State of Florida to act as Limited Guardian of the Person and Property of TWILA STARR PORTER, with full power to exercise all power or the following powers and duties pertaining to the Ward's Person and Property:

- to determine her residence;
- 2. to consent to medical and mental health treatment:
- to make decisions about her social environment or other social aspects of her life;
- to contract:
- to sue and defend lawsuits:
- 6. to apply for government benefits; and
- 7. To manage property or to make any gift or disposition of property:

except the Guardian shall not exercise any rights enumerated under § 744.3215(1). Fla. Stat.

The Guardian shall execute any power over any health care surrogate appointed by any valid advance directive executed by the Ward, pursuant to § 744.345. Fla. Stat. save and except the Ward's Living Will dated November 18, 2016, which shall remain effect, except upon order of this Court.

ORDERED on