L04000094206

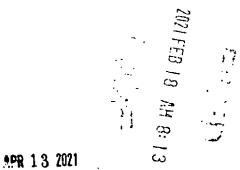
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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S. YOUNG

COVER LETTER , .

_	stration Section sion of Corporations			
SUBJECT:	FLUID POWER OF FLORIDA, LLC (Name of Limited Liability Company)			
30000001.				
The enclosed	d member, resignation or disso	ociation and fee(s) are submitted for filing.	
Please return	all correspondence concerni	ng this matter to:	:	
CHRISTIAN V	V WAUGH			
	(Contact Person)		_	
WAUGH GRA	ANT PLLC			
	(Firm/Company)		_	
321 N CRYST	AL LAKE DRIVE SUITE 207			
	(Address)		_	
ORLANDO, F	1. 32803			
	(City/State and Zip Code)		_	
For further in	nformation concerning this ma	atter, please call:	:	
CHRISTIAN V	V WAUGH	321 at (8006008	
(N	lame of Contact Person)		e & Daytime Telephone Number)	
Enclosed ple \$25 Filing	ase find a check made payabl g Fee		Department of State for: g Fee & Certified Copy	
	ng Address:		Street Address:	
	stration Section sion of Corporations		Registration Section Division of Corporations	
	Box 6327 hassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, F1, 32303	

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)

	limited liability company D POWER OF FLORIDA, LLC	as it appears on the records of the Florida Department
2. The Florida doc £04000094206	ument/registration number	assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign is:
4. 1. WILLIAM C. WARNER (Print Name of Person Resigning)		hereby withdraw/resign as a
MEMBER		
 -	(Print Title)	
resignation in wr	riting.	the limited liability company has been notified of my
Signature of D	issociating Member or Res	igning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	202