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TALL HIASSEC, I LORDA

JAN 11 2016 S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Burbach Investigation (Name of Limited Li	ment Group, LLC lability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to:
Luke Carrendel (Contact Person)	
D. (a	SECRET JAN
(Firm/Company)  498 Sw Ring Ct  (Address)	1-8-MIZ
Lake City, Fr 30025 (City/State and Zip Code)	——————————————————————————————————————
For further information concerning this matter, plo	ease call:
Luke Carrender at (Name of Contact Person) (A	Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for: 655 Filing Fee & Certified Copy .
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

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)

			•
	limited liability company as	_	
of State is:	wbach Investme	ant Group, LIC	<u>,                                    </u>
2. The Florida docu	ument/registration number as	signed to this limited liabil	lity company is:
L050DC	0018587		
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resi	gn is: 12/1/2015
4. I, Luke (Print N	arrender  Jame of Person Resigning)	, hereby withdraw/res	ign as a
VP	(Print Title)		
	bility company and affirm the	e limited liability company	has been notified of my
resignation in wr	iting.		** <b>5</b>
zuk i	), Caucalles		JAN T
Signature of Di	ssociating Member or Resign	ning Manager	STATE OF THE STATE
_	\$25.00 (Required) \$30.00 (Optional)		PH 12: 29