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(Re	equestor's Name)		
(Address)			
(A	ddress)		
(C	ity/State/Zip/Phon	ne #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Filing Officer:			

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COVER LETTER

Registration Section

Division of Corporations

TO:

CR2E079 (2/14)

SLABVJAX INVESTMENT GROUP 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: **FABIOLA SANTIAGO** (Contact Person) PRINCE CPA GROUP (Firm/Company) 9161 NARCOOSSEE RD. SUITE 202 (Address) ORLANDO, FL 32827 (City/State and Zip Code) For further information concerning this matter, please call: **FABIOLA SANTIAGO** (Name of Contact Person) (Area Code & Daytime Telephone Number) 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)

1. The name of the	limited liability company as	it appears on the records of the Florida Department
of State is:	BVJAX INVESTMENT GF	ROUP LLC
2. The Florida doc	ument/registration number as	ssigned to this limited liability company is:
L0500006364	0	•
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is: 4/7/2017
4. I, FRANK PRINCE		. hereby withdraw/resign as a
(Print N	lame of Person Resigning)	, hereby withdraw/resign as a
MGR		
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
5		
Signature of D	issociating Member or Resig	ning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	