L05000108100

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT	MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of	Status		
Special Instructions to Filing Officer:			

Office Use Only



300272435803

resignation & Member

05/01/15--01018--023 **100.00



5/15

COVER LETTER

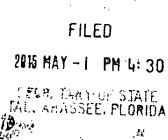
TO: Registration Section **Division of Corporations** International Commerce Partners, LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Thomas M. Dryden (Contact Person) Thomas M. Dryden, P.L. (Firm/Company) 1705 Colonial Blvd. Ste. B-3 (Address) Fort Myers, FL 33907 (City/State and Zip Code) For further information concerning this matter, please call: Thomas M. Dryden (Area Code & Daytime Telephone Number) (Name of Contact Person) 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

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)

1. The name of the	limited liability company as	it appears on the records of the F	lorida Department
of State is:	national Commerce Partne	ers, LLC	····································
2. The Florida docu L05000108100		signed to this limited liability con	npany is:
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:	
4. I. 4M Managen	nent, LLC	, hereby withdraw/resign as a	a
(Print N	ame of Person Resigning)	, nereby withdrawiresign as t	"
Member			
	(Print Title)		
of this limited liab resignation in wri		e limited liability company has be	een notified of my
Willia R	Manterin.		
Signature of Di	ssociating Member of Resign	ning Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		