

L05000110399

(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



000272437810

Resignation of
member

05/01/15--01018--020 ***100.00

FILED

2015 MAY -1 PM 3:41

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

OR
5 | 7 | 15

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Trade Way Commerce Partners, LLC
(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 at (239) 337-2001
(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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

2015 MAY -1 PM 3:41

OFFICE OF THE CLERK OF STATE
TALLAHASSEE, FLORIDA

**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: Trade Way Commerce Partners, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L05000110399

3. The date this member/manager withdrew/resigned or will withdraw/resign is: _____

4. I, Arreca Limited, hereby withdraw/resign as a
(Print Name of Person Resigning)

Member

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

James M
Signature of Dissociating Member or Resigning Manager

Authorized Signatory
RBC Corporate Services (CI) Limited

James M
Authorized Signatory
RBC Directorship Services (CI) Limited

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)

FOR AND ON BEHALF OF
ARRECA LIMITED