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S. WARREN AUG 0 8 2017

#### **COVER LETTER**

Division of Corporations
SUBJECT: CAPTI INTERNATIONAL, VENTURES, 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:
Robbie C. Hicks (Contact Person)
(Firm/Company)
8411 W. Oakland Park Birel Zw) (Address)
Survise 11. 33351 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (959) 451-942)  (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sumsymbol{\sumsymbol{1}}\$ \$\sumsymbol{2}\$ \$\sumsymbol{5}\$ Filing Fee & Certified Copy
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#### 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

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 as	it appears on the records of the FENTURES, LLC	lorida !	Departme	en 
2. The Florida doct	-	ssigned to this limited liability con	mpany	is:	
3. The date this me	mber/manager withdrew/resi	igned or will withdraw/resign is:	07/20	/2017	
		, hereby withdraw/resign as	a		_
MANAGER	(Print Title)				
of this limited lia resignation in wr		e limited liability company has be	een not	ified of n	ny
Signature of Di	ssociating Member or Resign	ning Manager		F11. 17 AUG - 7	
	\$25.00 (Required) \$30.00 (Optional)		SSEEL FLOW	FILED 3-7 PH 3: 4	