Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: METRO BUSINESS AGENCY, INC. Account Name

Account Number : 120080000101 Phone

: (239)465-8690

Fax Number : (239) 275-0865

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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SANCHEZ ENTERPRISE GROUP, LLC Certificate of Status 0 Certified Copy

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CR2E079 (2/14)

## **COVER LETTER**

	gistration Section vision of Corporations				
\$UBJEC1	SANCHEZ ENTERPRISE	GROUP, LLC			
• •••		(Name of Limited Liability Company)			
The enclose	sed member, resignation of dissoc	istion and fee(s	) are submitted for filing.		
Please reti	um all correspondence concerning	this matter to:			
HANNA	SRODA				
	(Contact Person)		-		
METRO	BUSINESS AGENCY INC				
10.000	(Firm/Company)		•		
15200 S	TAMIAMI TRAIL 117		_		
<del>,,,,,</del>	(Address)		<del>-</del>		
FORT M	YERS, FL 33908				
	(City/State and Zip Code)		-		
For further	r information concerning this mat	ter, please call:	•		
HANNA	SRODA	239	466-8600		
	(Name of Contact Person)		& Daytime Telephone Number)		
Enclosed ■ \$25 Fil	please find a check made payable ing Pee		Department of State for: Fee & Certified Copy		
	COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section Division of Corporations			Registration Section Division of Corporations		
Clifton Building			P.O. Box 6327		
2661 Exe	cutive Center Circle ce, Florida 32301		Taliahassee, Florida 32314		



## PLORIDA 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 a ICHEZ ENTERPRISE GI	s it appears on the records of the Florida Department
2. The Florida doca L0600008794	•	assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/re	signed or will withdraw/resign is: 11/20/2014
(Print A	ame of Parson Resigning)	, hereby withdraw/resign as a
		the limited liability company has been notified of my
Signature of D	ssociating Member or Resi	gning Manager
Filing Fee: Certified Copy:	\$25,00 (Required) \$30.00 (Optional)	