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COVER LETTER

TO: Registration Section Division of Corporations	
OpenPublic Networks. SUBJECT:	
	(Name of Limited Liability Company)
The enclosed member, resignation	on or dissociation and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to:
Adam Radwan	
(Contact Pers	
OpenPublic Networks, LLC	22 OCT 4
(Firm'Compa	ny) — i
2922 Starwood Dr.	
Address)	5: 08
Oviedo, FL 32765	-
(City/State and Zi	ip Code)
For further information concerning	ng this matter, please call:
Adam Radwan	407 4849994 at ()
(Name of Contact Person	
Enclosed please find a check made \$25 Filing Fee	de payable to the Florida Department of State for: S55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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	imited liability company as it	appears on the records of the Florida Do	epartment
of State is: OpenP	ublic Networks, LLC		
2. The Florida docu L07000014081	ment/registration number assig	gned to this limited liability company is:	:
3. The date this men	nber/manager withdrew/resign	ed or will withdraw/resign is:	2
Ghada Baz		, hereby withdraw/resign as a	
(Print No	me of Person Resigning)		
Manager			
	Print Title)		
of this limited liab resignation in wri		imited liability company has been notifi	ied of my 22 OCT 14
Signature of Dis	sociating Member or Resignir	g Manager	AM 5:
Filing Fee:	\$25.00 (Required)		80
Certified Copy:	\$30.00 (Optional)		~ <u>r</u>