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MAR 11 2013 T. HAMPTON

COVER LETTER

Division of Corporations					
SUBJECT: Mastio Exterprice 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:					
Mark Mastro (Contact Person)					
Mastra Enterrise, LLC (Firm/Company)					
40 Symphony Way					
Freeport, F1. 32439 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Mark Mastio at (B50) B35-3548 (Area Code & Daytime Telephone Number)					
Enclosed please find a check made payable to the Florida Department of State for: \$\sim \frac{1}{2} \\$25 \text{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					

CR2E079 (12/13)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the lin	nited liability company as it app	pears on the records of the F	Florida Dep	artment
2. The Florida docum	ent/registration number of this l	• • •	:	
3. The date this members 4. I, See November (Print Name)	per withdrew or will withdraw is Response of Person Resigning)	s: /////3, hereby resign as a ancm	Ser Jac (Print Jitle)	ntner
of this limited liabil resignation in writin	ity company and affirm the limi	ited liability company has b	/ .	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SECKE TALLAHAS	MILHAR I

CR2E079 (12/13)