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COVER LETTER

TO:

CR2E079 (2/14)

TO:	_	stration Section sion of Corporations		
SUBJ		Lee Barrow, LLC		
		(Name of L	imited Liability Com	npany)
The er	nclosed	d member, resignation or disso	ciation and fee(s)) are submitted for filing.
Please	returr	all correspondence concerning	g this matter to:	
Alton	Lee E	Barrow		
		(Contact Person)		-
Lee E	Barrow	, LLC		
		(Firm/Company)		-
2225	East	Edgewood Dr, Suite 11		
		(Address)		-
Lakel	land, f	FL 33881		
		(City/State and Zip Code)		-
For fu	ırther i	nformation concerning this ma	itter, please call:	
Alton	Lee E	Barrow	863 at (937-9152
	(N	lame of Contact Person)	····	& Daytime Telephone Number)
	sed ple 5 Filing	ease find a check made payable g Fee		Department of State for: g Fee & Certified Copy
	-	OURIER ADDRESS:		MAILING ADDRESS:
_		Section Corporations		Registration Section Division of Corporations
	n Buil	•		P.O. Box 6327
		tive Center Circle		Tallahassee, Florida 32314
Tallal	nassee,	Florida 32301		





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 Florida Department Barrow, LLC
2. The Florida docu L0800000201	ment/registration number assigned to this limited liability company is:
4. I, Michelle Tull	mber/manager withdrew/resigned or will withdraw/resign is:
Managing Me	mber Print Title)
	bility company and affirm the limited liability company has been notified of my
	Ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)