## 108000052971

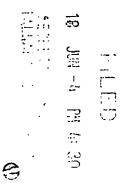
(Re	equestor's Name)			
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## **COVER LETTER**

TO: Registration Section

CR2E079 (2/14)

Division of Corporations		
SUBJECT: CARRENTAL8, LLC		
<del></del>	mited Liability C	ompany)
The enclosed member, resignation or disso	ciation and fee	(s) are submitted for filing.
Please return all correspondence concerning	g this matter to	):
SHERYL HUNTER		
(Contact Person)		<del>-</del>
HUNTER BUSINESS LAW		
(Firm/Company)	<del>_</del>	_
119 S. DAKOTA AVENUE		
(Address)	<del></del>	<del></del>
TAMPA, FL 33606		
(City/State and Zip Code)		_
For further information concerning this matter	ter, please call	:
SHERYL HUNTER	813	867-2640
(Name of Contact Person)	' \	e & Daytime Telephone Number)
Enclosed please find a check made payable t  \$\begin{align*} \begin{align*} \begi		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building 2661 Executive Center Circle		P.O. Box 6327
Tallahassee. Florida 32301		Tallahassee, Florida 32314



## 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 of State is:	he limited liability company as it a ARRENTAL8, LLC	ppears on the records of the Florida Department
	ocument/registration number assign	ned to this limited liability company is:
	nember/manager withdrew/resigne OUP HOLDINGS, LLC Name of Person Resigning)	d or will withdraw/resign is: MAY 28, 2018 _, hereby withdraw/resign as a
MEMBER	(Print Title)	
resignation in w	ability company and affirm the lin	nited liability company has been notified of my
Yues Boy Signature of D	er as Manager:	X MANAGER (Manager (M
-	\$25.00 (Required) \$30.00 (Optional)	