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| PICK-UP | ☐ WAIT | MAIL | | |
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| (Bus | siness Entity Nar | ne) | | |
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| Certified Copies | Certificates | s of Status | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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D. SCOTT **OCT** 1 9 2016

COVER LETTER

| Division of Corporations | |
|---|---|
| SUBJECT: The Mobility Store LLC | |
| (Name of Limited Liability Com | pany) |
| The enclosed member, resignation or dissociation and fee(s) | are submitted for filing. |
| Please return all correspondence concerning this matter to: | |
| John L Vath Jr. | |
| (Contact Person) | • |
| The Mobility Store LLC | |
| (Firm/Company) | • |
| 915 N Florida Ave | |
| (Address) | • |
| Lakeland FL 33801 | |
| (City/State and Zip Code) | - |
| For further information concerning this matter, please call: | SECON S |
| John L Vath Jr. 813 | 477-7124 S T T T T T T T T T T T T T T T T T T |
| (Name of Contact Person) (Area Code | & Daytime Telephone Numbe |
| Enclosed please find a check made payable to the Florida De \$25 Filing Fee ☐ \$55 Filing | & Daytime Telephone Number 2 epartment of State for: Fee & Certified Copy |
| _ | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |

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)

| | limited liability company as Mobility Store LLC | it appears on the records o | of the Florida Department |
|---------------------------------------|---|------------------------------|---------------------------|
| 2. The Florida docı | ıment/registration number as | signed to this limited liabi | lity company is: |
| L0900002537 | 3 | | |
| 3. The date this me | mber/manager withdrew/resi | gned or will withdraw/resi | ign is: |
| 4. I, RENEE NAK | | , hereby withdraw/res | sign as a |
| (Print N | ame of Person Resigning) | | |
| President and | d Managing Member | | |
| | (Print Title) | | |
| of this limited lia resignation in wr | bility company and affirm thiting. | e limited liability company | / has been notified of my |
| Signature of Di | ssociating Member or Resig | ning Manager | = 20 5 |
| • | \$25.00 (Required) \$30.00 (Optional) | | OCT 19 |