## 109000044449

(Re	equestor's Name)			
(ive	questor s rearrie)			
	idress)			
DA)	aress)			
(Address)				
(Cit	ty/State/Zip/Phone #)			
☐ PICK-UP	WAIT N	MAIL		
(Bu	siness Entity Name)	<del></del>		
(Do	ocument Number)			
Certified Copies	_ Certificates of Status			
	_			
	· <del></del>	<del></del>		
Special Instructions to	Filing Officer:	ŀ		
		ļ		
		[		

Office Use Only



200303041642

03/01/17--01015--028 \*\*25.00

17 SEP -1 PN 2:37
SECRULARY OF STATE
TALLAHASSEE FLORIDA

## **COVER LETTER**

то:	Registration Section Division of Corporations		
SUBJ			
	(Name of Limit	ed Liability Con	npany)
The er	nclosed member, resignation or dissocia	tion and fee(s	) are submitted for filing.
Please	return all correspondence concerning th	nis matter to:	
Kevin	n W. Smith		
-	(Contact Person)	-	-
She's	s A Peach Holdings, LLC		
	(Firm/Company)	· · ·	-
1120	1 SW 136th Street		_
	(Address)		
Miam	ii, Florida 33176		
	(City/State and Zip Code)		-
For fu	rther information concerning this matter	, please call:	
Kevin	W. Smith	786 at (	458 2891
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
_	sed please find a check made payable to Filing Fee		
Regist	ET/COURIER ADDRESS: ration Section on of Corporations		MAILING ADDRESS: Registration Section Division of Corporations
	on of Corporations  Building		P.O. Box 6327
2661 E	Executive Center Circle assee, Florida 32301		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	• •	`the Florida Department
2. The Florida doc L0900004444	ument/registration number as	ssigned to this limited liabili	ity company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resig	28 Aug 2017
0 11 0 01			
Manager			
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	e limited liability company	has been notified of my
Gelin-	Kullen 38 issociating Member or Resig	Cing 21/7	17 SECK
Signature of D	issociating Member or Resig	ning Manager	FIL SEP - ETARY HASSE
_	\$25.00 (Required) \$30.00 (Optional)		EE FLORID