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COVER LETTER

Division of Corporations
SUBJECT: GLIG GROWDWOKKS, 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:
George LAZCANO (Contact Person)
GLIG GROWDWORKS, LLC (Firm/Company)
160 W. CAMINO Real #124
BOCA RATON FL, 33431 (City/State and Zip Code)
For further information concerning this matter, please call:
George Lazeavo at (561) 809-432 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sim \frac{\times 55}{25}\$ 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 (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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is:G	LIG GROUNDWORKS, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L090000	060458
3. The date this mer	mber/manager withdrew/resigned or will withdraw/resign is: 1/1/20/6
4. I, LidiA (Print No.	Tuskin , hereby withdraw/resign as a game of Person Resigning)
MANAGE	Print Title)
of this limited liab resignation in writ	oility company and affirm the limited liability company has been notified of my ting.
Lin	- Josha
Signature of Dis	ssociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)