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SECRETARY OF STATE
DIVISION OF CORPORATION

T. HAMPTON

AUG - 5 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GODMAN HOLDING CAPITAL, LLC. (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
HYW VO
(Contact Person)
GOODMANHOLD ING CAPITAL, LC. (Firm/Company)
SSA CEDAR FORFSI OR. (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
HUYNH, QUYEN S at (40) 334 - 5575 (Name of Contact Person) - (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327. Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

of State is:	GTOODMAN HOL	DINGCAPITAL ,	uc.	·	•
· . 2 This limited lia	hility company was org	anized under the laws of	· ·		
Et ook	4	anned under the laws of	•		
TUKIO		•		·	
3. The Florida doc	cument/registration num	ber of this limited liabili	ity company is:		
L0900	00954-13	<u> </u>			
4. I, <u>QUYE</u>	Name of Person Resigning)	+ , hereby resig	n as a	RM rint Title)	
of this limited lie resignation in w		irm the limited liability of	company has bee	en notified of my	y
		7/30/19	, D		•
Signature of Res	igning Member, Manag	ging Member or Manage	er :	: .	
•		y .		<u> </u>	
Filing Fee:	\$25.00 (Required)			≥ مي	ഗ