410000030397

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | e #) |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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(RM 2-5-15

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|--|
| SUBJECT: SIGNS-R-US, LLC | | |
| (Name of Limited Liability Co | ompany) | |
| The enclosed member, resignation or dissociation and fee | (s) are submitted for filing. | |
| Please return all correspondence concerning this matter to |): | |
| Gary F. Ginter | 1 | |
| (Contact Person) | | |
| SIGNS-R-US, LLC | 7 | |
| (Firm/Company) | | |
| 23330 Harborview Rd., Unit F | JAN 26 PM 1:28 DRSTART OF STATE AHASSEE FLORID | |
| (Address) | ————————————————————————————————————— | |
| Charlotte Harbor, FL 33980 | 96 St. F. 0 | |
| (City/State and Zip Code) | AIF RAIF | |
| For further information concerning this matter, please cal | n: | |
| Gary F. Ginter | 505-0104 | |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) | | |
| Enclosed please find a check made payable to the Florida Department of State for: \$\subseteq \\$25 \text{ Filing Fee} \\$\subseteq \\$55 \text{ 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 Tallahassec, 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: SIGNS-R-US, LLC |
| 2. The Florida document/registration number assigned to this limited liability company is: L10000030397 |
| 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/2014 |
| 4. I, Gary F. Ginter , hereby withdraw/resign as a (Print Name of Person Resigning) |
| (Print Name of Person Resigning) |
| MGRM |
| (Print Title) |
| of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. |
| Signature of Dissociating Member of Resigning Manager |
| Digital of Dissolitating tylemotivoticesigning lytanager |
| Filing Fee: \$25.00 (Required) |
| Certified Copy: \$30.00 (Optional) |

CR2E079 (2/14)

M.