L10000053151

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
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2015 SEP 21 PH 2: 34
SECRETARY OF SIGNAL

SEP 2 4 2015 J. HARRIS

COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	PRISTINE RENTALS, LLC		
	(Name of Limite	d Liability Co	mpany)
The enclosed	d member, resignation or dissociati	ion and fee(s) are submitted for filing.
Please return	all correspondence concerning th	is matter to:	
MELECIA .	JOHNSON		
	(Contact Person)		_
PRISTINE	RENTALS, LLC		
	(Firm/Company)		_
7027 W. BI	ROWARD BLVD., #381		
	(Address)		_
PLANTATION	ON, FL 33317		
1163 2 31	(City/State and Zip Code)		_
For further in	nformation concerning this matter,	please call:	
MELECIA .		954 at (980-0006
(N	lame of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclosed ple	ease find a check made payable to tog Fee		Department of State for: g Fee & Certified Copy
	OURIER ADDRESS:		MAILING ADDRESS:
Registration Division of C			Registration Section Division of Corporations
Clifton Build		,	P.O. Box 6327
	ive Center Circle 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)

	STINE RENTALS, LLC	s it appears on the records of th	ne Florida Department
2. The Florida doc L1000005315	-	ssigned to this limited liability	company is:
3. The date this mo	ember/manager_withdrew/res	signed or will withdraw/resign , hereby withdraw/resign	
MGRM	(Print Title)		
resignation in w	ability company and affirm th	ne limited liability company ha	s been notified of my
	\$25.00 (Required)	ymng munugu	SEP 21 PM 2: AHASSEE FLOR