11000055184

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D. SCOTT NOV 2 3 2015

COVER LETTER

Division of Corporations			
SUBJECT: Lookin Back, LLC			
	ted Liability Con	npany)	
The enclosed member, resignation or dissocia	ation and fee(s	a) are submitted for filing.	
Please return all correspondence concerning t	this matter to:		
Anne Herstol			
(Contact Person)		_	
Prince CPA Group			
(Firm/Company)		_	
9161 Narcoossee Road Ste 202			
(Address)		_	
Orlando, FL 32827			
(City/State and Zip Code)		_	75 16
For further information concerning this matte	er, please call:		ECREE TI
Anne Herstol	407 at (823-8230	22 EE
(Name of Contact Person)	(Area Code	& Daytime Telephone Num	iber) R R
Enclosed please find a check made payable to □ \$25 Filing Fee		Department of State for: Fee & Certified Copy	2: 18 TATE LORIDA
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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 of State is: Look	• • •	it appears on the records of the Flo	rida Department
2. The Florida docu L10000055184	•	signed to this limited liability comp	oany is:
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is:	11/30/16
4. I, Keith Buesch	er	, hereby withdraw/resign as a	1 / 1
Manager			
	Print Title)		
of this limited liab resignation in wri		limited liability company has been	n notified of my
Keich 13	Sunta		
Signature of Di	ssociating Member or Resign	ing Manager	₹% 6
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		NOV 21 PH CRETARY OF S LLAHASSEE, FL