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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
. (В	usiness Entity Name)	
(0	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	51
		:
10	Office Use Only	



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

SEP 2 9 2014 T. CARTER

LLC Momber Rosism

COVER LETTER

TO: Registration Section Division of Corporations	
l Corporations	
SUBJECT: OHT LLC (Name of Limited Liability)	
(Name of Limited Liability	Company)
The enclosed member, resignation or dissociation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
Efrain Soler (Contact Person)	
(Contact Person)	
04;t LLC (Firm/Company)	
(Firm/Company)	
3470 NW 82nd Lve Ste	. 630
(Address)	
Doral, FL 33122 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please ca	all:
Efrain Soler at (305) (Name of Contact Person) (Area C	, 469 4081.
(Name of Contact Person) (Area C	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid □ \$25 Filing Fee □ \$55 Fi	la Department of State for: ling Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327

Tallahassee, Florida 32314

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (2/14)



SECRETARY OF STATE TALLAHASSEE. FLORIDA

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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: 04it LLC
2. The Florida document/registration number assigned to this limited liability company is:
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8 31 /14 4. I,
Manager (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 or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)