11000085076

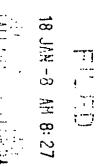
(I	Requestor's Name)	
(/	Address)	
	Address)	
	City/State/Zip/Phone #	f)
PICK-UP	WAIT	MAIL
(Business Entity Name	·)
(1	Document Number)	
Certified Copies	Certificates o	f Status
Special Instructions	to Filing Officer:	
		:

Office Use Only



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O SIMMONS

JAN 0.9 2018



December 22, 2017

JOSEPH RYAN, III, ESQ 8925 SW 148 ST, STE 200 MIAMI, FL 33176

SUBJECT: SAMCHA LLC Ref. Number: L10000085076

We have received your document for SAMCHA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please enter date member withdrew/resigned from company.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 817A00025973

14/18 Perose Des artailed

RECEIVED

JAN - 8 2018

COVER LETTER

Division of Corporations		
SUBJECT: SAMCHA LLC		
(Name of Limi	ted Liability Co	mpany)
The enclosed member, resignation or dissocia	ition and feef	s) are submitted for filing.
Please return all correspondence concerning t	his matter to:	
JOSEPH B. RYAN III, ESQ		
(Contact Person)		
JOSEPH B. RYAN III, PA		
(Firm/Company)		
8925 SW 148 STREET, SUITE 200		
(Address)		_
MIAMI, FLORIDA 33176		
(City/State and Zip Code)		_
For further information concerning this matter, please call:		
JOSEPH B. RYAN III	305 at (444-4949 _) e & Daytime Telephone Number)
(Name of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclosed please find a check made payable to 825 Filing Fee		Department of State for: g 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 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)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: 5amcha LLC.
2. The Florida document/registration number assigned to this limited liability company is:
<u> 110000085076</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: //////
4.1. FRANCK SULTAN hereby withdraw/resign as a (Print Name of Person Resigning)
MANAGER MENBER
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)
Certified Copy. #30.00 (Optional)

CR2E079 (2/14)