

L 10 000 100 197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

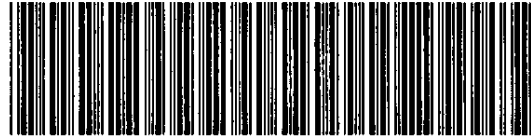
(Business Entity Name)

(Document Number)

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2018 APR - 9 P 12:50  
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: SOUTHEND VENTURES LLC

2. The Florida document/registration number assigned to this limited liability company is:

L10000100197

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01 JAN 2017  
20 Jan 2017 RPS

4. I, Robert S Pryce-Jones, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Manager/Member

(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

CLERK OF STATE  
TALLAHASSEE, FLORIDA

2018 JAN -9 P 12:50

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Certified Copy: \$30.00 (Optional)