## #110000119394

(Re	questor's Name)	<del></del>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
·		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



900257513079

03/10/14--01004--004 \*\*25.00

SECRETARY OF STATE FALLAHASSEE. FLORIDA

2014 MAR 10 PM 4: 39

K. SALY EXAMINER MAR 1 2 2014

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Flawless Telemas Keting LLC (Name of Limited Liability Company)		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to:		
Andrew R. Friedman (Contact Person)		
Friedman Rosenwesser & Goldgern, PA (Firm/Company)		
284 Hstchison Rd (Address)		
Paris Ky 40361 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (859) 255-1944  (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for:  \$25 Filing Fee \$ Certified Copy		
STREET/COURIER ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee, Florida 32314Tallahassee, Florida 32301		

CR2E079 (12/13)



FILED

2014 MAR 10 PM 4:39

SECRETARY OF STATE FALLAHASSEE. FLORIDA

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: Flawless Teleman Keting un
·
2. The Florida document/registration number of this limited liability company is:
<u> </u>
3. The date this member withdrew or will withdraw is: February 10, 2014
4. I, Edmondo Catalfano, hereby resign as a Manager (Print Name of Person Resigning) (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
La Selevado Carlano
Signature of Resigning or Dissociating Manager, Member
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)

CR2E079 (12/13)