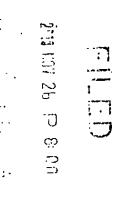
LIICCULICO71

(Requestor's Name)				
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PICK-UP WAIT MAIL				
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COVER LETTER

TO:

Registration Section

Tallahassee, Florida 32301

CR2E079 (2:14)

Division of Corporations **ACTION 66 INVESTMENTS LLC** SUBJECT: (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: Maria C Alvarez (Contact Person) The Gecka Group Inc. (Firm Company) 13255 SW 137th Ave Suite 105 (Address) Miami, FL 33186 (City State and Zip Code) For further information concerning this matter, please call: 256-1046 Maria C Alvarez (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & Certified Copy □ \$25 Filing Fee STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314



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	s it appears on the records of the	Florida Department
of State is: ACT	ION 66 INVESTMENTS I	LLC	<u> </u>
L1100001007	7	ssigned to this limited liability o	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is thereby withdraw/resign a	11/1.9/2018 7
Print N Manager Me		, hereby withdraw/resign a	, ,
	(Print Tule)		
resignation in wr		ne limited liability company has	been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		