

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·

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2019 JUL -1 AM 8: 10

J. SAULSBERRY EXAMINER JUL -2 2013



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

This limited liability company was organ	nized under the laws of:		
The Florida document/registration numb L11000016705	er of this limited liability	y company is:	
I. John Wai	hereby resign	asa Managi	ng Member
(Print Name of Person Resigning)		(Pri	int Title)
afakia limiaad liakilia.	m the limited liability co	mpany has been	n notified of my
of this limited liability company and affir resignation in writing.		•	

CR2E079 (5/06)

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)