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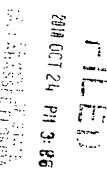
	(Requestor's Name)
•	(Address)
•	(Address)
	(City/State/Zip/Phone #)
PICK-U	P WAIT MAIL
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	(Document Number)
Certified Copies	Certificates of Status
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

SUBJECT: TRIVMPH MANAGE (Name of Limited Liability Con	EMENT, LLC
(Name of Limited Liability Con	mpany)
The enclosed member, resignation or dissociation and fee(s	s) are submitted for filing.
Please return all correspondence concerning this matter to:	
YANITZA DIXON	
(Contact Person)	
TRIUMPH MANAGEMENT L	LC.
212 SE 124 ST (Address)	
(1001000)	<u> </u>
FORT LAUDERDALE ,FL 333/6	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
YANITZA DIXON at 786	<u> </u>
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Finchesed please find a check made payable to the Florida I \$25 Filing Fee \$55 Filing	Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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 it appears on the records of the Florida Department
of State is: TRIUMPH MANAGE MENT, LLC.
2. The Florida document/registration number assigned to this limited liability company is:
<u> L11 000 06 1147 </u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/22/20/2
4. I. The Discovery hereby withdraw/resign as a (Print Name of Person Resigning)
Tille authorized member (Print Tille)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Dissociating Member of Resigning Manager
Filing Fee: \(\sigma \text{\$25.00 (Required)} \)
Certified Copy: \$30.00 (Optional)