11000131404

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Jag Development LLC	
	Limited Liability Company)
The enclosed member, resignation or dis-	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
Niko Semedo	
(Contact Person)	
Jag Development LLC	
(Firm/Company)	
11016 Oak Ridge DR North	
(Address)	
Jacksonville, FL 32225	
(City/State and Zip Code)	<u> </u>
For further information concerning this r	natter, please call:
Niko Semedo	904 446-0107
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payabase \$25 Filing Fee	ble to the Florida Department of State for: \$\square\$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee. Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



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)

	limited liability company as	it appears on the record	ds of the Florida Department	
2. The Florida doci	ument/registration number as	ssigned to this limited l	iability company is:	
	mber/manager withdrew/res		/resign is:	
4. I, Rick Camara (Print Name of Person Resigning)		, hereby withdraw/resign as a		
Manager				
-	(Print Title)			
of this limited lia resignation in wr		e limited liability comp	pany has been notified of my	
Signature of Di	ssociating Member or Resig	ning Manager	ZON Z	
_	\$25.00 (Required) \$30.00 (Optional)		ALLAHASSES FLOR	