## [[1000115J4]

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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the of State is:	limited liability company as	it appears on the records o	of the Florida Department
	ility company was organized	l under the laws of:	
L11000	ument/registration number of		
4. I, <u>Georgian N</u>	ame of Person Resigning)	, hereby resign as a	PArtner (Print Title)
of this limited lial resignation in wr	bility company and affirm th	e limited liability company	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	÷ ,	