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R. WHITE

## **COVER LETTER**

Division of Corporations
SUBJECT: 5Winnie Boo LLC (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:
(Contact Person)
(Print/Company)
Charles and State 2700 W Rensacola Street Apt 1716
(Address)  Tallahassee F-L 32304  (City/State and Zip Code)
For further information concerning this matter, please call:
Waterknowles =1 (352) 942-3086
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\square\$ \$\frac{1}{2}\$ \$

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

TO: Registration Section

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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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 records of the Florida Department  Minnie Boo Luc.
1000	ment/registration number assigned to this limited liability company is:
4. I, hering	mber/manager withdrew/resigned or will withdraw/resign is: 8/28/14  Color of Person Resigning)  , hereby withdraw/resign as a
_manag	26 (Print Title)
	bility company and affirm the limited liability company has been notified of my
Signature of Di	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)