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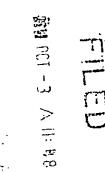
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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	CHASE RECORDS, LLC			
0020	(Name of Limited	Liability Con	npany)	
The e	nclosed member, resignation or dissociation	on and fee(s) are submitted for filing.	
Please	return all correspondence concerning this	matter to:		
MAR	GOT BORDAS			
	(Contact Person)		-	
NUM	ILA INC		,	T.
	(Firm/Company)		- <i>'</i> .	ist act
55 R	IVERWALK PLACE SUITE 842		•	<u> </u>
	(Address)		_	> '
WES	T NEW YORK, NJ 07093		. :	V II: #8
	(City/State and Zip Code)		- ***	σ.
For fu	rther information concerning this matter, p	please call:		
BRIA	N SPIRIO	954 (2633793	
	(Name of Contact Person)	· 	& Daytime Telephone Numb	per)
	sed please find a check made payable to th Filing Fee		Pepartment of State for: Fee & Certified Copy	
Regist Divisi Clifto 2661	CET/COURIER ADDRESS: cration Section on of Corporations n Building Executive Center Circle cassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231	4

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)

CH	e limited liability comp	С	ears on the reco	ords of the Flori	da Departm	ieht E
2. The Florida doc L120000	ument/registration nur 091902	mber assigne	d to this limited	liability compa	ny is: 11: ₽8	٣
ROCCO VA	ember/manager withdr LDES Name of Person Resigning)	_		w/resign is:	07/18	_
of this limited lia resignation in w	(Print Title) ability company and af	firm the limi	ted liability con	npany has been i	notified of	my
Signature of D	issociating Member or	r Resigning N	Aanager			
Filing Fee:	\$25.00 (Required)					