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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section Division of Corporations

Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

SUBJECT: X-uberance Enterprises 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:
Kenneth Farabee (Contact Person)
X-vbarance Enterprises LLC
4780 NW 39th Ave Ste. 1
Gainesville, FL 32606 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (919) 441-0441 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$ \$\\$55 \text{ Filing Fee} \text{ 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

FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY (Pursuant to 605.0216, Florida Statutes)	いう
1. The name of the limited liability company as it appears on the records of the Florida partnent	
of State is: X-Uberance Enterprises UC.	
2. The Florida document/registration number assigned to this limited liability company is:	
L12000103361	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7-5-18 4. I. Jason Lumley hereby withdraw/resign as a (Print Name of Person Resigning) Managing Member (Print Title)	
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.	
In limbo	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	