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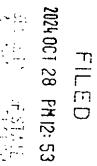
(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

TO:	_	stration Section			
	Divis	sion of Corporations			
SUBJ	IECT:	The Leetzow Group LLC			
		(Name of L	imited Lia	bility Co	mpany)
The e	nclosed	I member, resignation or disso	ociation	and fee(s) are submitted for filing.
Please	e return	all correspondence concernit	ng this m	atter to:	
Joni L	ectzow l	Rametta			
		(Contact Person)			_
The Le	eetzow (Group LLC			
		(Firm/Company)			_
6230 t	Jniversii	ty Parkway #305			
		(Address)			_
Saraso	ota FL 34	1240			
		(City/State and Zip Code)			_
For fu	ırther ii	nformation concerning this ma	itter, ple	ase call:	
Joni L	cetzow l	Rametta	9 at (41	361-1484
	(N	ame of Contact Person)			& Daytime Telephone Number)
Enclo	sed ple	ase find a check made payable	e to the !	Florida I	Department of State for:
= \$2	5 Filing	g Fee	□ \$	55 Filin	g Fee & Certified Copy
	Mailir	ng Address:			Street Address:
	Regis	stration Section			Registration Section
		sion of Corporations			Division of Corporations
		Box 6327			The Centre of Tallahassee
	Taila	hassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303





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)

	e limited liability company as it appears on the records of the Florida Departmer	ıt
2. The Florida do	cument/registration number assigned to this limited liability company is:	
L12000137162		
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is:	
Leonard E Lee	zow Jr. , hereby withdraw/resign as a	
(Print	Name of Person Resigning)	
MGR		
	(Print Title)	
of this limited li resignation in w	ability company and affirm the limited liability company has been notified of my	/
Ven	erd & Veetan	
Signature of I	Dissociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Conv	\$30.00 (Ontional)	







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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it appears on the records of the Florida Departmen	ıt
of State is:	eetzow Group LLC	
2. The Florida doci	ment/registration number assigned to this limited liability company is:	
L12000137162		
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:	
4. I. Leonard E Leetz	, hereby withdraw/resign as a	
(Print N	ame of Person Resigning)	
MGR		
	(Print Title)	
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of my iting.	,
Venio	ud E Vector	
Signature of Di	ssociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	