## L12000147312

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SECRETARY OF STATE

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C. LEWIS
MAR 2 6 2014
EXAMINER

## **COVER LETTER**

CR2E079 (2/14)

TO: Registration Section Division of Corporations				
SUBJECT: CELSOFT LLC (Name of Limited Liability Company)				
(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:				
FERGAL STACK (Contact Person)				
CELSOFT LLC (Firm/Company)				
75 N WOODWARD AVR #8000-1816 (Address)				
Tallahussee, FL 32313 (City/State and Zip Code)				
For further information concerning this matter, please call:				
FERGAL STACK at (917) 680-2518 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of State for:  \$\$\sum{\$\text{\$\exititt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				

APPROVED AND FILED



14 MAR 24 PM 12:09

SECRETARY OF STATE TALL AHASSEF, PLORID.

## 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)

Cels	limited liability company as it soft LLC	appears on the records of the Florida Department.
2. The Florida doct L1200014731	<del>-</del>	gned to this limited liability company is:
		 2014-Mar-11
	ember/manager withdrew/resig	ned or will withdraw/resign is:
Brian Hart		1. 5. 24.1. (
4. I,	Jame of Person Resigning)	, hereby withdraw/resign as a
Member/Man		
Membernian	iagei .	
	(Print Title)	
of this limited lia resignation in wr	* *	limited liability company has been notified of my
	>n/-	
Signature of D	issociating Member or Resigni	ng Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	