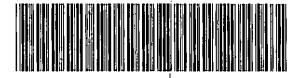
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(Requestor's Name)					
(Address)					
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COVER LETTER

	Division of Corporations		:
SUBJE	CT: SERVIPAK INTERNATIO	NAL GROUP,	LLC
502015		Limited Liability Co	ompany)
The enc	losed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please re	eturn all correspondence concerni	ng this matter to:	:
CARLO	OS CASTANEDA		
	(Contact Person)		
SERVI	PAK INTERNATIONAL GROU	P, LLC	
	(Firm/Company)		
8318 N	IW 68TH ST.		
	(Address)		- -
МІАМІ,	FL 33166		
	(City/State and Zip Code)		
For furth	her information concerning this m	atter, please call:	:
CARLO	OS CASTANEDA	786	,
	(Name of Contact Person)	(Area Cod	e & Daytime Telephone Number)
	d please find a check made payabl filing Fee		Department of State for: g Fee & Certified Copy
Registra Division Clifton I 2661 Ex	T/COURIER ADDRESS: Ition Section It of Corporations Building Recutive Center Circle Resec, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
CR2E079 ((2/14)		1



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	s it appears on the records of the Flo GROUP, LLC	orida Department
2. The Florida doc	_	ssigned to this limited liability com	pany is:
D 43 (10 D) 4 =	-	alghed or will withdraw/resign is:	7/24/2017
	SECRETARY	, hereby withdraw/resign as a	17 AUG -
of this limited lia resignation in w		ne limited liability company has bee	n notified in my T
Signature of D	issociating Member or Resig	ning Manager	
_	\$25.00 (Required) \$30.00 (Optional)		