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JUL 1 7 2015 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WP Consulting & Assessment, 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:
Leigh E. Wooten (Contact Person)
W.P. Consulting & Assessment, LLC
13/26 Marsh Fern Drive 5
Orlando, FL 32828 (City/State and Zip Code)
For further information concerning this matter, please call:
Leigh E. Wooten at (321) 278-6163 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sim \frac{1}{2}\$\$ \$25 Filing Fee & Certified Copy

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

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)

	limited liability company as it appears on the rec	-
of State is:	NP Consulting & Ass	essment, LLC
2. The Florida docu	ument/registration number assigned to this limited	l liability company is:
L12 000	0160582	
3. The date this me	mber/manager withdrew/resigned or will withdra	w/resign is: $\frac{7/31/2015}{}$
	G. Perry , hereby withdra	
manag	Print Title)	
of this limited lial resignation in wr	bility company and affirm the limited liability coriting.	mpany has been notified of my
Marla (y Dary	
Signature of Di	ssociating Member or Resigning Manager	16 R 2 15
_	\$25.00 (Required)	# 2
Certified Copy:	\$30.00 (Optional)	