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FISH 4: 18

August 23, 2016

Catalyst Group International, Inc. 124 Bedstone Dr. St Johns, FL 32259

To Whom It May Concern:

Enclosed are the Resignation / Dissociation forms for the following companies:

- Catalyst Consulting Services, Intl., LLC
- · Catalys Strop International Life
- Friends of Israel, Inc.
- Global Provision Group, Inc.
- Israel's Children, Inc.
- South Sudan National Fund, Inc.

Additionally, I have included payment of \$130.00 for services.

Thank you,

Pat Gosselin

16 SEP 26 PM 4: 18
SECRETARY OF STATE
ALL AHASSEF FLORID.

## **COVER LETTER**

PO: Registration Section Division of Corporations				
Catalyst Consulting Services INTL., LLC SUBJECT:				
(Name of Limited Liability Com	npany)			٠
The enclosed member, resignation or dissociation and fee(s)	) are submitted for filing.			
Please return all correspondence concerning this matter to:				
Robert Gosselin				
(Contact Person)	-			
(Firm/Company)	-	•		
124 Bedstone Dr.		ZS:	<del>.</del> 6	
. (Address)	-		န္တ	<u>-</u>
St Johns, FL 32259		ESSE P	P 26	
(City/State and Zip Code)	<del>.</del>		PH	
For further information concerning this matter, please call:			<del>†:</del>	
Robert J Gosselin 904	923 7028		ිත	
	& Daytime Telephone Number	er)		
Enclosed please find a check made payable to the Florida D  ■ \$25 Filing Fee □ \$55 Filing	epartment of State for: Fee & Certified Copy			
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	<b>.</b>		

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)

	e limited liability company as alyst Consulting Services I		of the Florida Department
2. The Florida doc	cument/registration number as	signed to this limited liab	ility company is:
	94	<del>_</del> -	
3. The date this m	ember/manager withdrew/resi	igned or will withdraw/res	8/22/2016 sign is:
4. I, Robert J Go	sselin Name of Person Resigning)	, hereby withdraw/re	esign as a
Manager	,		
	(Print Title)		
resignation in w	ability company and affirm the riting.  Pissociating Member or Resign	<u></u>	y has been notified of my  FILED  FILED  FILED
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)		9000 1000 1000 1000 1000 1000 1000 1000