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Registration Section

2661 Executive Center Circle

Tallahassee, Florida 32301

CR2E079 (2/14)

Division of Corporations

TO:

SUBJECT: MAD ENTERPLY (Name of Limited Liability Co	
The enclosed member, resignation or dissociation and feet	(s) are submitted for filing.
Please return all correspondence concerning this matter to	:
HOWARD BASSUC (Contact Person)	
D+B AutoG/455 (Firm/Company)	18 A SECTION AS A
3248 W Colonial D.	ALED
Orlando Fa 32808 (City/State and Zip Code)	· · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call	. .
HOWAVD BASSUK at (786) (Name of Contact Person) (Area Cod	le & Daytime Telephone Number)
S25 Filing Fee S55 Filing	Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314



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)

1. The name of the l	imited liability com	•				•	ment	
2. The Florida docu 13 3. The date this mer 4. I, Michel (Print Na	nent/registration nu OOOOO77 nber/manager withd He Cha/l- me of Person Resigning	mber assign	ned to this l ed or will w	imited liability ithdraw/resign	y compai	ny is:	114	
(-	firm the lit	mited liabil	ity company h	as been 1	notified o	f my	
Signature of Dis	sociating Member of \$25.00 (Required \$30.00 (Optional)	g Manager			Albassee, Flori	AUG -6 PH 5:	FILED