L 13000043903

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COVER LETTER

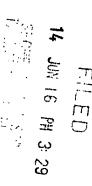
TO: Registration Section **Division of Corporations** TRAINING ESSENTIALS, LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Ed Herder (Contact Person) TRAINING ESSENTIALS, LLC (Firm/Company) 4238 Hollywood Blvd. Suite 205 (Address) Hollywood, FL 33021 (City/State and Zip Code) For further information concerning this matter, please call: Ed Herder 305 305-672-0000 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314

Tallahassee, Florida 32301

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)

1. The name of the	limited liability company as	it appears on the records of the Florida Department
of State is:	INING ESSENTIALS, LLC	·
2. The Florida docu	ument/registration number ass	signed to this limited liability company is:
L1300004390	3	
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:
4. I, Peter Schwartz (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print N	ame of Person Resigning)	
MGRM		
	(Print Title)	
of this limited lial resignation in wri		limited liability company has been notified of my
E PE	8 Clin	zu
Signature of Di	ssociating Member or Resign	ing Mahager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	