## 13000046123

(Re	equestor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phon	e #)		
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## **COVER LETTER**

.

**TO:** Registration Section

CR2E079 (2/14) 1 1 1 3 3 3

Division of Co	orporations				
SUBJECT: Evergre	en Holiday Lighting	LLC			
	(Name of Limited Liability Company)				
The enclosed member	, resignation or dissoc	iation and fee(	s) are submitted for filing.		
Please return all corre	spondence concerning	this matter to	:		
Suzan Meehle					
	(Contact Person)		<del></del>		
Meehle Law Firm					
····	(Firm/Company)		<del></del>		
115 Maitland Ave, th	nird floor				
	(Address)		_		
Altamonte Springs,	FL, 32701				
(Ci	ty/State and Zip Code)		_		
For further information	n concerning this matt	ter, please call:			
Suzan Meehle		407 at (	792-0790		
(Name of Co	ntact Person)		& Daytime Telephone Number)		
Enclosed please find a \$25 Filing Fee	check made payable		Department of State for: g Fee & Certified Copy		
,					
STREET/COURIER	ADDRESS:		MAILING ADDRESS: Registration Section		
Registration Section Division of Corporation	nns		Division of Corporations		
Clifton Building	•••		P.O. Box 6327		
2661 Executive Center	r Circle		Tallahassee, Florida 32314		
Tallahassee, Florida 32	2301				



## 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)

of State is: Evergreen Holiday Lighting Li  2. The Florida document/registration number a		namu ie:
L13000046123		ally is.
3. The date this member/manager withdrew/res	signed or will withdraw/resign is:	30/2015
4. I.	, hereby withdraw/resign as a	76
(Print Name of Person Resigning)	•	FEB .
member managing		5 5 F
(Print Title)		PH
of this limited liability company and affirm the	ne limited liability company has beer	notified of my
resignation in writing.		No.
Temphalaul 1	losena	
Signature of Dissociating Member or Resig	gning Manager	

Certified Copy:

\$30.00 (Optional)