L13000050369

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
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Diss/m/m/LLC

COVER LETTER

Divis	ion of Corporations			
SUBJECT:	Another Man's Treasure and	d Collectibles	, LLC	
Sender	(Name of Limited Liability Company)			
The enclosed	I member, resignation or dissoci	ation and fee(s	s) are submitted for filing.	
Please return	all correspondence concerning	this matter to:		
Philip Sewa	ard			
	(Contact Person)		_	
Another Ma	an's Treasure and Collectible	s, LLC		
	(Firm/Company)		-	
151 Doe R	un Drive		_	
	(Address)			
Winter Gan	den, FL 34787			
	(City/State and Zip Code)			
For further is	nformation concerning this matt	er, please call:		
Philip Sewa	ard	407	247-4796	
. (N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed ple	ease find a check made payable t g Fee		Department of State for: g Fee & Certified Copy	
	OURIER ADDRESS:		MAILING ADDRESS:	
Registration	Section Corporations		Registration Section Division of Corporations	
Clifton Build			P.O. Box 6327	
	ive Center Circle		Tallahassee, Florida 32314	

CR2E079 (2/14)

Tallahassee, Florida 32301

TO: Registration Section



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 ther Man's Treasure and	s it appears on the records of the Florida Departmen Collectibles, LLC	t
2. The Florida doct	_	ssigned to this limited liability company is:	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	
ひっきゃっ てっしゅっ			
(Print N	Jame of Person Resigning)	, hereby withdraw/resign as a	
MGR			
	(Print Title)		
resignation in wr	iting.	ne limited liability company has been notified of my	r
Signature of Di	THE INTERIOR OF		
	1	JAN -	i
Filing Fee:	\$25.00 (Required)	ن ش	_
_	\$30.00 (Optional)		1
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