## 13000052220

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	Idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



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EXAMINER DEC 21 2015

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Upton Holdings, LLC (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:			
Charles B. Upton (Contact Person)			
Upton Holdings, LLC (Pirm/Company)			
9005 Eagles Ridge Dr. (Address)			
Tallahassee, Fl 32312 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Charles Upton at (850) 228-9175  (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for:  2 \$25 Filing Fee			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			

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: Upton Holdings LLC.
2. The Florida document/registration number assigned to this limited liability company is:
1/300005-2220
3. The date this member/manager withdrew/resigned or will withdraw/resign is:
4. I, And H. Upto, hereby withdraw/resign as a (Print Name of Person Resigning)
Co - Munaging Mimber (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
amostron
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)  Contified Conv. \$20.00 (Ontional)
Certified Copy: \$30.00 (Optional)