L13000052542

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | ldress) | |
| (Ac | idress) | |
| (Ci | ty/State/Zip/Phon | e #) |
| PICK-UP | TIAW T | MAIL |
| (Bı | usiness Entity Na | me) |
| (Do | ocument Number) |) |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations |
|---|
| · |
| SUBJECT: EVANS Global 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: |
| James Ewas (Contact Person) |
| EWAS Global LLC (Firm/Company) |
| 618 N. New Warrington Road (Address) |
| FersAzoly FL 32506 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Tames Ewans at (850) 418-1630 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{\text{\$\exitit{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\$\$\$}}}\$} |
| STREET/COURIER ADDRESS: MAILING ADDRESS: |

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32314

CR2E079 (2/14)

Registration Section

Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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: <u>E</u> | vans Global L.L.C |
| 2. The Florida doc | ument/registration number assigned to this limited liability company is: |
| L1300 | 0052542 |
| 3. The date this me | ember/manager withdrew/resigned or will withdraw/resign is: 8/13/16 |
| 4. I, James G (Print N | ame of Person Resigning), nereby withdraw/resign as a |
| _ member | Print Title) |
| of this limited lia resignation in wr | bility company and affirm the limited liability company has been notified of my |
| | |
| Signature of D | ssociating Member or Resigning Manager |
| Filing Fee: | \$25.00 (Required) |
| Certified Copy: | \$30.00 (Optional) |