11300061588

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(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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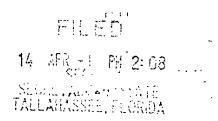
R. WHITE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BOMTON ADVERTISING LI		
(Name of Limited Liability Company)		
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to:	
Peter J. Vasti, Esq.		
(Contact Person)		
DiVito & Higham, P.A.		
(Firm/Company)	** 1.50°** 1.5	
4514 Central Avenue		
(Address)		
St. Petersburg, FL 33711		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
David Bergen	727 360-6927	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee		
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	1 ananassee, 1 10114a 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: BOMTON ADVERTISING LLC	·
2. The Florida document/registration number assigned to	this limited liability company is:
L13000061588	
3. The date this member/manager withdrew/resigned or w	ill withdraw/resign is: 3 26 14
4. I, , here	hy withdraw/resign as a
4. I, David J. Bergen , here (Print Name of Person Resigning)	by withdraw/resign as a
Vice President	
(Print Title)	
of this limited liability company and affirm the limited less resignation in writing. Signature of Dissociating Member or Resigning Management	
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	