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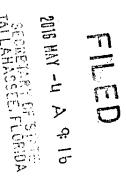
(Re	equestor's Name)				
(Address)					
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COVER LETTER

TO: Re	egistration Section				
D	ivision of Corporations				
SUBJEC	T: Pantemonium, LLC				٠
SCHOLLE		Limited Liability Com	npany)		
The enclo	sed member, resignation or disso	ociation and fee(s)) are submitted for fili	ing.	
Please ret	urn all correspondence concernir	ng this matter to:			
Scott Ste	erner				
	(Contact Person)	,	-		
Pantemo	onium, LLC				
	(Firm/Company)		-		
7123 Ca	loosa Court				
	(Address)		-		
Orlando,	FL 32819				
	(City/State and Zip Code)	V	-	7.0 ~ 2	
For furthe	er information concerning this ma	atter, please call:		ZOIG HAY SEGRETA	
Rebecca	Lupo	407	601-3426	Y - 4 ASSE	
	(Name of Contact Person)	(Area Code	& Daytime Telephone 1		
Enclosed	please find a check made payable	e to the Florida D	epartment of State for	ന്നുള്	O
■ \$25 Fil	ing Fee	□ \$55 Filing	Fee & Certified Copy	/ इस न	

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



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	s it appears on the records	of the Florida Department
2. The Florida doc	ument/registration number as	ssigned to this limited liab	oility company is:
L1300007107	4		
3. The date this me	ember/manager withdrew/res	signed or will withdraw/re	sign is:
4. I, Rebecca Lupo , hereby withdraw/resign			
(Print N	ame of Person Resigning)	· •	
Member			
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability compan	y has been notified of my
Signature of Di	ssociating Member or Resig	ning Manager	
Filing Fee: Certified Copy:			ZDIB WAY -U A &