L13000013613

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
% -	Office Use On	nlv



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11/03/14--01015--014 **25.00

16 NOV -3 RUIN: 39

ROMEN MONTH

COVER LETTER

Division of Corporations
SUBJECT: POWEISPORT CONNECTION 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:
Elaine Davis (Contact Person)
PawerSport Convection LCC (Firm/Company)
901 N SK 19 (Address)
Palatka, FL 32177 (City/State and Zip Code)
For further information concerning this matter, please call:
Elbure Dewis at (386) 326-3640
(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: MAILING ADDRESS:

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, Florida 32314

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

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)

	mited liability company as it appears on the records of the Florida Department
of State is: P_{Ω}	versport Connection LLC
2. The Florida docun	nent/registration number assigned to this limited liability company is:
<u>L130000</u>	73(013
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 11-5-14
	ne of Person Resigning), hereby withdraw/resign as a
MGR (P	rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
Donald	Mayors
Signature of Diss	sociating Member or Resigning Manager
Filing Fee:	
Certified Copy:	\$30.00 (Optional)