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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

JAN 07 2015 T. CARTER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GUERRIERO,	LLC		
SUBJECT: GUERRIERO, LLC (Name of Limited Liability Company)			
The enclosed member, resignation or dissocia	tion and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to:			
. LAWRENCE CAPLAN (Contact Person)	<u>/</u>		
LAWMENCE A. CAPLAN, PA (Firm/Company)			
1375 GATEWAY BU	<u>(0</u>		
BOYNTON BRACH, FC 33476 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Contact Person)	at (S&1) 245.0763 (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy		
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

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

14 DEC 29 AM 8: 12

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is:	VERLIENO, LIC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
	086615
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 12/24/14
4.1, THOMAS O	SUEARIEND, hereby withdraw/resign as a me of Person Resigning)
MANAG (P	ER rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my
resignation in writi	
Signature of Diss	ociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
•	
CR2E079 (2/14)	