# L17660 105789

(Re	equestor's Name)				
(Address)					
(Ad	ldress)				
(Cir	ty/State/Zip/Phone	e #)			
PICK-UP	TIAW	MAIL			
(Bı	isiness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
•					

Office Use Only



100286552481

06/14/16--01006--002 \*\*25.00

2016 JUN 13 AM 11: 36

16 JUN 14 MH 7: 13

#### **COVER LETTER**

TO:

Registration Section

Tallahassee, Florida 32301

CR2E079 (2/14)

**Division of Corporations** The New Fitness, LLC SUBJECT: (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: Dino DeMarco (Contact Person) The New Fitness, LLC (Firm/Company) 10031 lan's Ridge Road (Address) Orlando, FL 32832 (City/State and Zip Code) For further information concerning this matter, please call: Dino DeMarco 407 473-9456 (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 □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle 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)

2. The Florida document/registration number assigned to this limited liability company is:  116000054121  3. The date this member/manager withdrew/resigned or will withdraw/resign is:  4. I, MARIA A. MONTOYA SALAZAR hereby withdraw/resign as a (Print Name of Person Resigning):  AMBR  (Print Title)  of this limited liability company and affirm the limited liability company has been notified of resignation in writing.  Signature of Dissociating Member or Resigning Manager	of State is: IMONSA1, LI	_C			·				*
3. The date this member/manager withdrew/resigned or will withdraw/resign is:  4. I, MARIA A. MONTOYA SALAZAR  hereby withdraw/resign as a  (Print Name of Person Resigning);  AMBR  (Print Title)  of this limited liability company and affirm the limited liability company has been notified of resignation in writing.	2. The Florida document/reg	,			is limite	d liabilit	y compa	ny is:	
3. The date this member/manager withdrew/resigned or will withdraw/resign is:  4. I, MARIA A. MONTOYA SALAZAR hereby withdraw/resign as a (Print Name of Person Resigning)  AMBR  (Print Title)  of this limited liability company and affirm the limited liability company has been notified of resignation in writing.							nei	เกลเรากาเ	8
AMBR  (Print Title)  of this limited liability company and affirm the limited liability company has been notified of resignation in writing.	3. The date this member/mar	ager withdrew	/resigned	d or wil	v withd	raw/resig	n as a	% . t ) t	
of this limited liability company and affirm the limited liability company has been notified of resignation in writing.	(Print Name of Per.	son Resigning);	Part of the second	di d	athering to the second	and the state of t	A Company		* <b>*.</b> * }
resignation in writing.	(Print Title)	or standing to the	T. 3			ege en e	* , * * * * * * * * * * * * * * * * * *	· * 4.	
The Ningmoha Unitry -		pany and affirm	n the lin	nited lia	bility c	ompany l	ias been	notified	of my
Signature of Dissociating Member or Resigning Manager	The Amaroha Unit	my >				- 28,		C.S	p <sup>n</sup> (S <sup>1</sup> )
	Signature of Dissociating	Meniber or R	esigning	g Manag	ger 🎺 🌯	a the part			, b.
		) (Required) ) (Optional)			•		2	* ·	



### 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)

The	e limited liability company as New Fitness, LLC	it appears on the records of the Fl	orida D	epartn	nent 
2. The Florida doc L1300010538	_	ssigned to this limited liability com	n	m	
Juan Moiica				-	
(Print i Manager	Name of Person Resigning)  (Print Title)	, hereby withdraw/resign as a		AH 7: 24	
of this limited lia resignation in w	ability company and affirm th	ne limited liability company has been	en notif	ied of	my
Signature of D	vissociating Member or Resig	ning Manager			
	\$25.00 (Required) \$30.00 (Optional)	KATHERIN FERREIRA Commission # FF 938480 My Commission Expires November 23, 2019			