L13000105991

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ALLAHASSEL FLUMB

B. BOSTICK JAN **1** 5 2014

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: AMS 2013 LLC (Name of Limited Liability Con	npany)	
The enclosed member, managing member or manager resig filing.	nation and fee(s) are submitted for	
Please return all correspondence concerning this matter to:		
Justin G. Brook, Esq.		
(Contact Person)	-	
Kramer & Golden, P.A.	_	
(Firm/Company)		
1175 NE 125th Street, Suite 512		
(Address)	_	
North Miami, Florida 33161	ALL ALL	
(City/State and Zip Code)		
For further information concerning this matter, please call:	<u> </u>	
Justin G. Brook, Esq. at (305	ຸ899-1800 👙 🕏	
(Name of Contact Person) (Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida I	Department of State for: \$55 Filing Fee &	
C	Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	

Tallahassee, Florida 32301

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability co of State is: AMS 2013 LLC	ompany as it appears on the records of the Flo	orida De	epartment
2. This limited liability company was Florida	organized under the laws of:	TALLAMASSI	2014 JAN 10 Ph 12: 3
3. The Florida document/registration L13000105991	number of this limited liability company is:		Pa 12: 37
4. I, Dmitry Birman	, hereby resign as a Managi	ng Me	ember
(Print Name of Person Resign	ing) (Pi	rint Title))
of this limited liability company and resignation in writing.	l affirm the limited liability company has bee	n notifi	ed of my
Signature of Resigning Member, M MIKHAIL SHIR AS DURABLE POWE	anaging Member or Manager ER OF ATTORNEY FOR DMITRY BIRMAN		
Filing Fee: \$25.00 (Require Certified Copy: \$30.00 (Option)	•		