

L13000109982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

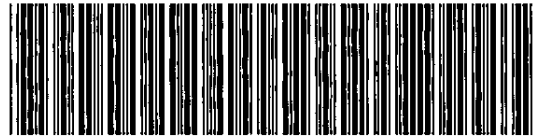
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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Resignation
of MGR

08/29/14--01008--012 **135.00

FILED
2014 AUG 29 PM 12: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MGR
9/8/14

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 3145 Partners, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas M. Egan
Name of Person

Thomas M. Egan, Chartered
Firm/Company

2107 SE 3rd Ave.
Address

Ocala, FL 34471
City/State and Zip Code

paulastauss@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas M. Egan at **(352) 629-7110**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 3145 Partners, LLC

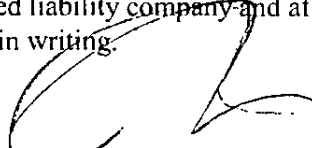
2. The Florida document/registration number assigned to this limited liability company is: L13000109982

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/4/2014

4. I, Thomas M. Egan, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGR
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)