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J. Shivers JAN 1 7 2013

## **COVER LETTER**

Division of Corporations  SUBJECT:	TO: Registration Section	
The enclosed member, resignation or dissociation and fee(s) are submitted for fining  Please return all correspondence concerning this matter to:    John White   Contact Person	Division of Corporations	
The enclosed member, resignation or dissociation and fee(s) are submitted for fining  Please return all correspondence concerning this matter to:    John White   Contact Person		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing  Please return all correspondence concerning this matter to:    John White   Contact Person	SUBJECT: INTERNATIONAL	LASTITUTE OF CULTURE &
The enclosed member, resignation or dissociation and fee(s) are submitted for fining  Please return all correspondence concerning this matter to:    John White   Contact Person	(Name of Lin	nited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing  Please return all correspondence concerning this matter to:    John White   Contact Person	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	IECHNOLOGY LLC
Sohn White (Contact Person)   INTERNATIONAL TWST. OF CHUMINE & TECHNOLOGY LUCK (Firm/Company)		
Contact Person	Please return all correspondence concerning	this matter to:
Contact Person	JOHN WHITE	
SAINT CIOUD FL 34769		
SAINT CIOUD FL 34769		1 - 1./
SAINT CIOUD FL 34769	TACTEMALATIONAL TAIST	DE CHITME & TECHNOLOGY LLC
SAINT CLOUD FL 34769	(Firm# omnany)	- Of State of the
SAINT CINIT FL 34769  (City/State and Zip Code)  For further information concerning this matter, please call:    DEBONAH	(Pinto Company)	
SAINT CINIT FL 34769  (City/State and Zip Code)  For further information concerning this matter, please call:    DEBONAH	3201 BUDINGER AT	ve
For further information concerning this matter, please call:    DEBONAH   LIVINGSTON   AT ( 407 ) 55 2 - 1087     (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   Tallahassee. Florida 32314	(Address)	
DEBONAH LIVINGSTON   at ( 407 ) 552-1087     (Name of Contact Person)   (Area Code & Daytime Telephone Number)    Enclosed please find a check made payable to the Florida Department of State for: \$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   Tallahassee. Florida 32314	SAINT CLOUD FL (City/State and Zip Code)	34769
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:  Registration Section Registration Section  Division of Corporations  Clifton Building P.O. Box 6327  2661 Executive Center Circle Tallahassee. Florida 32314	For further information concerning this matt	er, please call:
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Certified Copy  STREET/COURIER ADDRESS:  Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Clifton Executive Center Circle Tallahassee. Florida 32314	Enclosed please find a check made payable to	to the Florida Department of State for:
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Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee. Florida 32314		Certified Copy
Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP.O. Box 63272661 Executive Center CircleTallahassee. Florida 32314	CTREET/COURSED ABDRESS.	MAILING ADDDESS.
Division of Corporations  Clifton Building  2661 Executive Center Circle  Division of Corporations  P.O. Box 6327  Tallahassee, Florida 32314		
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee. Florida 32314	<del>-</del>	•
2661 Executive Center Circle Tallahassee. Florida 32314	•	
Tallahassee, Florida 32301	Tallahassee, Florida 32301	

CR2E079 (12/13)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

The name of the l	imited liability company as	it appears on the	records of the F	Florida De	partme	nt
of State is: IN	TERNATIONAL IN	STITUTE OF	CULTURE	2 7 12	CHR	101.06
	imited liability company as TEUNATIONAL IN	7			ci	C.
	ment/registration number of		ility company is	:		
	3000 120 193	<u> </u>				
3. The date this men	nber withdrew or will withd	Iraw is: <u>01-0</u>	06-14			-
4.1. MANY 1	E. FITIGIBBONS me of Person Resigning)	, hereby resi	ign as a <u>M</u> @	R		-
(Print Na	me of Person Resigning)		1	(Print Title)		
of this limited liab resignation in writ	ility company and affirm thing.	e limited liability	company has b	een notifie	ed of m	<b>y</b>
Mary E.	Alexillor				rranh Fan	
Signature of Res	igning or Dissociating Man	nager, Member				2
Filing Fee:	\$25.00 (Required)			477		
Certified Copy:	, - ,			,		
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