

L13000 120143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

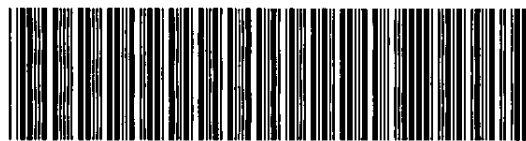
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600255568406

01/14/14--01022--006 **25.00

RECEIVED
TALLAHASSEE, FLORIDA
JAN 14 2014
6:00 PM

J. Shivers JAN 17 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INTERNATIONAL INSTITUTE OF CULTURE &
(Name of Limited Liability Company) TECHNOLOGY LLC

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)

INTERNATIONAL INST. OF CULTURE & TECHNOLOGY LLC

(Firm/Company)

3201 BUDINGER AVE

(Address)

SAINT CLOUD FL 34769

(City/State and Zip Code)

For further information concerning this matter, please call:

DEBORAH LIVINGSTON

(Name of Contact Person)

at (407) 552-1087

(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:

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: INTERNATIONAL INSTITUTE OF CULTURE & TECHNOLOGY LLC
2. The Florida document/registration number of this limited liability company is:
L13000120193
3. The date this member withdrew or will withdraw is: 01-06-14
4. I, MARY E. FITZGIBBONS, hereby resign as a MGR
(Print Name of Person Resigning) (Print Title)

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

Mary E. Fitzgibbons
Signature of Resigning or Dissociating Manager, Member

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

RECEIVED
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE
JAN 14 2014