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SECREIGHT OF STATE ALLAHASSEE, FLORIDA

JAN 2 8 2014

T. BROWN

COVER LETTER

TO: Registration Section Division of Corporations

International Institute of Culture and Technology, 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: Jackson Lo (Contact Person) International Institute of Culture and Technology, LLC (Firm/Company) 6209 Donegal Drive (Address) Orlando, Florida 32819 (City/State and Zip Code) For further information concerning this matter, please call: Jackson Lo (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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (12/13)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314







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

| | limited liability company as rnational Institute of Co | | |
|---|---|--------------------------------|-------------------------|
| 2. The Florida docu L130001201 | iment/registration number o | f this limited liability comp. | any is: |
| 3. The date this me | mber withdrew or will with | draw is: December 31, 2 | 2013 |
| _{4. I,} Jackson Lo | | , hereby resign as a | 00 A D |
| of this limited lial resignation in wri | pility company and affirm th | e limited liability company | has been notified of my |
| | To | | |
| Signature of Re | signing or Dissociating Ma | nager, Member | |
| _ | \$25.00 (Required) \$30.00 (Optional) | | |

CR2E079 (12/13)