## L13000125183

(Requestor's Name)			
(Address)			
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			
		:	

Office Use Only



700266638677

11/24/14--01020--065 \*\*25.00

14 NOV 24 PH 5: 01

12-5-14

## **COVER LETTER**

TO:

CR2E079 (2/14)

Registration Section

**Division of Corporations** AMELIA ASSET MANAGEMENT, LLC (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: **Timothy Seth Hastings** (Contact Person) AMELIA ASSET MANAGEMENT, LLC (Firm/Company) PO Box 1656 (Address) Trenton, FL 32693 (City/State and Zip Code) For further information concerning this matter, please call: **Timothy Seth Hastings** (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 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



SECRETARY OF STATE DIVISION OF CORPORATIONS
14 NOV 24 PM 5: 01

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## 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	t appears on the records of the Florida Department
of State is:	ELIA ASSET MANAGEMEN	IT, LLC
2. The Florida doct L1300012518	•	igned to this limited liability company is:
3. The date this me	ember/manager withdrew/resig	med or will withdraw/resign is:
Michalla H. L	Jostings	, hereby withdraw/resign as a
MGRM	and of Forson Resigning	
_	(Print Title)	
of this limited lia resignation in wr		limited liability company has been notified of my
Signature of Di	issociating Member or Resign	ing Manager
Signature of Di	assertating memory of feetign	
•	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	