## L13000 162 657

(R	equestor's Name)	
(A-	ddress)	
(A)	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nam	e)
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
<del></del>		

Office Use Only



09/20/19--01019--011 ++3

2019 SEP 20 MHO: 48

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## 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)

	FLORIDA LLC	ippears on the records of the Fl	orida Depa	artır
2. The Florida doc L1300016265	ument/registration number assig	ned to this limited liability con	npany is:	
. , TAL BARAK	ember/manager withdrew/resigno			
4. 1,(Print )	same of Person Resigning)	_, hereby withdraw/resign as a	ા ્ન	701
MANAGING	MEMBER			2019 SEP
	(Print Title)			P 20
of this limited lia resignation in wr	bility company and affirm the liniting.	nited liability company has be	en notified	80:0113
Signature of D	issociating-Member or Resigning	y Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			