L13000172425

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OCT 0 3 2014

C. CARROTHERS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PHOENIX NEW ITAM, 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:
GRACIN BRYAN (Contact Person)
PHOENIX INFINITAM LLC (Firm/Company)
2513 N.E. 3RD STREET
Ocala, FL 34470 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (352) 441-1386 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



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 of State is:	limited liability company as it appears on the records of the Florida Department	
2. The Florida docu	ment/registration number assigned to this limited liability company is: 000172625 mber/manager withdrew/resigned or will withdraw/resign is: August 27,201	2
4. I, ISAIAD (Print N	ame of Person Resigning), hereby withdraw/resign as a	
ı	Print Title)	
of this limited lial resignation in wr	oility company and affirm the limited liability company has been notified of my iting.	
Signature of Di ISAIAH TA	ssociating Member or Resigning Manager MBLINGSON 23 77 77 78 78 78 78 78 78 78 7	
Filing Fce: Certified Copy:	\$25.00 (Required) \$30.00 (Ontional)	