113000172752

| (Requestor's Name) | | | | | |
|---|--|--|--|--|--|
| | | | | | |
| (Address) | | | | | |
| | | | | | |
| (Address) | | | | | |
| , , | | | | | |
| (A) (A) (B) (A) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| | | | | | |
| (Business Entity Name) | | | | | |
| | | | | | |
| (Document Number) | | | | | |
| (Bosument Humber) | | | | | |
| | | | | | |
| Certified Copies Certificates of Status | | | | | |
| | | | | | |
| Special Instructions to Filing Officer: | | | | | |
| cpostal mondered to 1 mily ember. | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Office Use Only



900303578199

09/26/17--01015--030 **25.00

3/27/17

T SEP 26 M 8-13
SECRETARY OF STATE
AND ASSECT OF STATE

COVER LETTER

| _ | istration Section sion of Corporations | | ÷ |
|-----------------------------|---|------------------|---|
| SUBJECT: | Leebond Holdings, LLC | . • | |
| | (Name of Limited Liability Company) | | |
| The enclose | d member, resignation or dissoci | iation and fee(s | s) are submitted for filing. |
| Please return | n all correspondence concerning | this matter to: | |
| Kahlil Bon | d | | |
| | (Contact Person) | | - |
| Leebond H | Holdings, LLC | | |
| | (Firm/Company) | | <u>. </u> |
| P.O. Box 3 | 3983 | | |
| | (Address) | | _ |
| W. Palm B | each, FL 33402 | | · |
| | (City/State and Zip Code) | | - |
| For further i | nformation concerning this matt | er, please call: | |
| Kahlil Bond | d | 561 | 702-8308 |
| (1) | Name of Contact Person) | (Area Code | & Daytime Telephone Number) |
| Enclosed pleased \$25 Filin | ease find a check made payable t g Fee | | Department of State for: g Fee & Certified Copy |
| | COURIER ADDRESS: | | MAILING ADDRESS: |
| Registration Division of | Section Corporations | | Registration Section Division of Corporations |
| Clifton Buil | • | | P.O. Box 6327 |
| | tive Center Circle , Florida 32301 | , | 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 limited liability company as it appears on the records of the Florida Department of State is: Leebond Holdings, LLC | |
|---|-----|
| 2. The Florida document/registration number assigned to this limited liability company is: ±13000172752 | |
| 3. The date this member/manager withdrew/resigned or will withdraw/resign is: | |
| 4. I, Bianca (formerly Lee) Blake (Print Name of Person Resigning) Member / Manager , hereby withdraw/resign as a Resigning) | T] |
| (Print Title) | ラガン |
| Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required) | |

Certified Copy:

\$30.00 (Optional)