## <u>11400008369</u>

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R. WHITE

## **COVER LETTER**

	Registration Section Division of Corporations			
SUBJE	ECT: Creative Treasures Lynn Inlow LLC			
	(Name of Limit	ed Liability Com	pany)	
The end	closed member, resignation or dissocia	tion and fee(s	) are submitted for filing.	
Please	return all correspondence concerning the	nis matter to:		
Lynn F	P. Inlow		_	
	(Contact Person)			
Creati	ve Treasures Lynn Inlow LLC			
	(Firm/Company)		-	
12523	SE Old Cypress Drive		_	
	(Address)			
Hobe	Sound, FL 33455			
	(City/State and Zip Code)		-	
For further information concerning this matter, please call:				
Hartfo	ord or Lynn Inlow	772	245-8693	
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  \$\begin{align*} \text{\$\text{25}} \text{ Filing Fee} \text{\$\text{\$\text{Certified Copy}}  \end{align*}				
Registr Division Clifton 2661 E	exaction Section on of Corporations Building Executive Center Circle assee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (2/14)



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SECRETART OF STATE STALLAHASSEE, FLORIDA

## 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)

limited liability company as it appears on the records of the Florida Department tive Treasures Lynn Inlow LLC
ment/registration number assigned to this limited liability company is:
mber/manager withdrew/resigned or will withdraw/resign is:  April 1, 2015
, hereby withdraw/resign as a mme of Person Resigning)
Print Title)
vility company and affirm the limited liability company has been notified of my ting.
ssociating Member or Resigning Manager
\$25.00 (Required) \$30.00 (Optional)