L14000009990

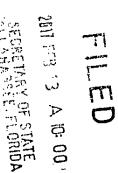
(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				

Office Use Only



400295005314

02/13/17--01021--012 **\$5,00



S Warren FEB 1 4 2017

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	JECT: E & E CLAUSELL LLC (Name of Limite	d Liability Con	npany)
The e	nclosed member, resignation or dissociat	ion and fee(s) are submitted for filing.
Please	e return all correspondence concerning th	is matter to:	
GAS	TON R. ALVAREZ, ESQ.		
	(Contact Person)		-
GAS	TON R. ALVAREZ, P. A.		
	(Firm/Company)		-
2655	S. LE JEUNE ROAD, SUITE PH-1C		
	(Address)		-
COR	AL GABLES, FL. 33134		
	(City/State and Zip Code)		-
For fu	orther information concerning this matter,	please call:	
GAS	TON R. ALVAREZ, ESQ.	305 at (443-3812
	(Name of Contact Person)		& Daytime Telephone Number)
	sed please find a check made payable to to filing Fee		Pepartment of State for: Fee & Certified Copy
	EET/COURIER ADDRESS:		MAILING ADDRESS:
	tration Section ion of Corporations		Registration Section Division of Corporations
	n Building		P.O. Box 6327
2661	Executive Center Circle nassee, 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)

	limited liability company as	s it appears on the records of the	Florida Depa	artment 	
2. The Florida docu L1400000999	-	ssigned to this limited liability co	ompany is:		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is:	01/01/201	7	
		, hereby withdraw/resign as a			
MANAGER A	ND MEMBER				
	(Print Title)				
of this limited lial resignation in wri		e limited liability company has b	oeen notified	of my	
Signature of Di	e: Cussio ssociating Member or Resig	ning Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		METER PA		