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SECRETIANY OF SHALE SHOWN OF CHRESCATION

C. LEWIS

JUL 29 2014

CXEMINER

COVER LETTER

Division of Corporations The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: For further information concerning this matter, please call: Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy \$25 Filing Fee

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

TO:

Registration Section

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



SECRETARY OF STATE STATE SECRETARIONS OF CORPORATIONS

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
of State is:	ORIDA TANKEM SKYLIVING LLC.
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L140	00015692
3. The date this me	mber manager withdrew resigned or will withdraw/resign is: 7-JULY 2014
4. I, FREEF (Print No.	mber manager (withdrew) resigned or will withdraw/resign is: 4-JULY 2014 LIGHT LIVE WATIONAL (NO.) Agree of Person Resigning)
	Print Title)
of this limited liab resignation in wri	bility company and affirm the limited liability company has been notified of my ting.
	AT INTERNATIONAL, INC.
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Conv:	\$30.00 (Optional)