# 140000 19/033

,			
(Requestor's Name)			
•			
(Address)			
(,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only

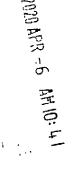


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DISSIPUSION M



## MEMBERSHIP TRANSFER AGREEMENT FROM ESPINAL TO BUCKHEAD CAPITAL

### EXHIBIT D

#### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJECT:	37C TEAM LLC_		
		f Limited Liability Company)	
The enclosed	member, resignation or dissoc	iation and fee(s) are submitted for filing.	
Please return	all correspondence concerning	this matter to:	
SANDRA YOR			
((	Contact Person)		
SANDRA YOR	RK, PLLC		
(	Firm/Company)		
1111 BRICKE	LL AVENUE, #2200		
	Address)		
MIAMI, FLOR	NDA 33131		
	City/State and Zip Code Person)	<del></del>	
For further in	formation concerning this mat	ter, please call:	
SANDRA YO	<b>RK</b> a	at (305) 229-888	
(Nam	e of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed plea	ase find check payable to the F	lorida Department of State for:	
\$25 Filing	Fee	□ \$55 Filing Fee	
Mailing Addr Registration Division of Tallahassee.	Section Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	



### 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 FloridaDepartment		
	of State is: 37C TEAM LLC		
2.	The Florida document/registration number assigned to this limited liability company is:		
	L14000019633		
3.	The date this member/manager withdrew/resigned or will withdraw/resign is 3/04/2020		
4.	I. ERICK ESPINAL hereby withdraw/resign as a		
	(Print Name of Person Resigning	2020 APR	-
	AUTHORIZED MEMBER	PR.	• •
	(Print Title)	φ	
	of this limited liability company and affirm the liability company has been notified of my resignation in writing	H 10: 4	ye
	Signature of Dissociating Member or Resigning Manager	<del>-</del>	

Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)