## L14000022428

(Requestor's Name)					
(Address)					
(Ad	ddress)				
(Ci	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(B	usiness Entity Nar	me)			
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



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> O BRUCE JANOS 2017

## **COVER LETTER**

	stration Section sion of Corporations	. •			
SUBJECT:	Resignation of Member	,			
	(Name of Limite	d Liability Cor	трапу)		
The enclosed	d member, resignation or dissociat	ion and fee(s	s) are submitted for	filing.	
Please return	n all correspondence concerning th	is matter to:			
Timothy Na	аду				
	(Contact Person)		·		
Guardians	LLC				
	(Firm/Company)		<del>_</del>		
26089 83rd	d Road				
	(Address)		_	2017 ALL	-77
Branford, F	Florida 32008			JAN -	-
***************************************	(City/State and Zip Code)		_	SE C	
For further in	nformation concerning this matter	, please call:		P 1: 14 of STATE	
Timothy Na		850	251-9044		
(N	Name of Contact Person)		de & Daytime Telephone Number)		
Enclosed ple	ease find a check made payable to g Fee		Department of State g Fee & Certified C		
	OURIER ADDRESS:		MAILING ADD		
Registration	Section Corporations		Registration Section		
Clifton Build			Division of Corpo P.O. Box 6327	DI ALIUHS	
2661 Execut	tive Center Circle		Tallahassee, Flori	da 32314	
Tallahassee,	Florida 32301				

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	·	
2. The Florida docu L1400002242	ument/registration number a	ssigned to this limited liabi	ility company is:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/res	ign is:	
4. I, Timothy Nagy (Print Name of Person Resigning)		, hereby withdraw/resign as a		
(Print N	lame of Person Resigning)			
Associate Dir				
	(Print Title)			
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability company	y has been notified of my	
	the		2017 2017	
Signature of Di	issociating Member or Resig	gning Manager	AH JAN	
_	\$25.00 (Required) \$30.00 (Optional)		LED 1-3 P I: 10 ASSEE, FLORID	