# L1400044941

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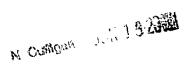




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#### COVER LETTER

Registration Section Division of Corporations

TO:

CR2E079 (2/14)

	Aquaflex Printing LLC		,
SUBJECT:	· · · · · · · · · · · · · · · · · · ·	mited Liability Con	npany)
The enclosed	member, resignation or disso	ciation and fee(s	) are submitted for filing.
Please return	all correspondence concerning	this matter to:	
Cheryl A Re	euter EA		
	(Contact Person)	<del></del>	-
Reuter Acco	ounting & Tax, Inc.		
	(Firm/Company)	·	-
PO Box 495	5753		
	(Address)		-
Port Charlot	ite, FL 33949-5753		
	(City/State and Zip Code)		-
For further in	nformation concerning this mat	tter, please call:	
Cheryl A Re	euter	941 at (	255-5552
(Na	nme of Contact Person)		& Daytime Telephone Number)
Enclosed plea \$25 Filing	ise find a check made payable Fee		Department of State for: Fee & Certified Copy
Registration : Division of C Clifton Build	Corporations ing		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
Tallahassee, I	ve Center Circle Florida 32301		Tallahassee, Florida 32314



#### FILED 2015 JUN 17 AN IO: 35 SECRETARY OF STATE, TALLAMASSEE, 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)

of State is:			
2. The Florida document/registration number assigned to this limited liability company is:  L14000044941			
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:		
4. I,	hereby withdraw/resign as a large of Person Resigning), hereby withdraw/resign as a		
Manager Men			
	(Print Title)		
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of mitting.		
Mul			
Signature of Di	issociating Member or Resigning Manager		
	\$25.00 (Required) \$30.00 (Optional)		
conned copy.	φυσίου (Ορασιαι)		
CR2E079 (2/14)			