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COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	SGS Performance Partn	ers			
SUDJEC		(Name of Limited Liability Company)			
The encl	osed member, resignation or dis	sociation and fee(s) are submitted for filing.			
Please re	eturn all correspondence concern	ing this matter to:			
Kevin S	Sweeney				
	(Contact Person)	,			
SGS Pe	erformance Partners	•			
	(Firm/Company)				
10011 (Dakhurst Way				
	(Address)				
Fort My	ers, FL 33913				
	(City/State and Zip Code)				
For furth	er information concerning this n	natter, please call:			
Kevin S	weeney	302 598-4311			
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
	l please find a check made payab iling Fee	le to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy			
Registrat Division Clifton B 2661 Exe	F/COURIER ADDRESS: cion Section of Corporations duilding ecutive Center Circle see, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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)

SG	e limited liability company as S Performance Partners LL		Florida Department
2. The Florida doc L1400005830		ssigned to this limited liability co	ompany is:
2 571 1		 ·	10/04/2016
	-	igned or will withdraw/resign is:	
Travis Sorto	r		
4. I,	June of Demons Designation	, hereby withdraw/resign as	s a
Managing Pa	irtner		
With Land Control of the Control of	(Print Title)		
of this limited lia resignation in wr		e limited liability company has b	peen notified of my
	A	>	
Signature of D	issociating Member or Resign	ning Manager	
0	<u> </u>	3	16 OCT – DIVISION DE
Filing Fee:	\$25.00 (Required)		<u> </u>
Certified Copy:	\$30.00 (Optional)		유 그