## 11400065297

(Requestor's Name)	_
(Address)	_
(Address)	<del></del>
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	7

Office Use Only



400275846934

08/10/15--01037--013 \*\*170.00



AUG 1 2 2015

" OH KER



## 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 ap	-	epartment
of State is: MBB Development, 1	-LC	·
2. The Florida document/registration number assign	ed to this limited liability company is	<b>3</b> :
L14000065297		<u>.</u> ΩΙ
3. The date this member/manager withdrew/resigned	d or will withdraw/resign is:	5015
	, hereby withdraw/resign as a $\frac{r_1}{r_1}$	B LL
(Print Name of Person Resigning)	STA.	f: 0
MGRM & REGISTING AGENT	©#F	=
(Print Title)  of this limited liability company and affirm the limited resignation in writing.	nited liability company has been notic	fied of my
Earl Hills		
Signature of Dissociating Member or Resigning	Manager	