L14000110604

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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(PRM) 2-4-15

COVER LETTER,

Division of Corporations			
SUBJECT: Good Luck Investments, LC			
(Name of Limite	d Liability Co	ompany)	_
The enclosed member, resignation or dissociation	ion and fee((s) are submitted for filing.	
Please return all correspondence concerning the	is matter to	:	
Craig Garber			
(Contact Person)			
Good Luck Investments, LLC			
(Firm/Company)	• • • • • • • • • • • • • • • • • • • •	A	1 5
3959 Van Dyke Road #253		BR MOA Broke	FEB -2 PH
(Address)		Control Contro	-2
Lutz, FL 33548		्रम् <u>ग</u> ुक	PH 6:
(City/State and Zip Code)	·		5
For further information concerning this matter,	, please call		
Craig Garber	813 at (482-7201	
(Name of Contact Person)		le & Daytime Telephone Number)
Enclosed please find a check made payable to ■ \$25 Filing Fee		Department of State for: ng Fee & Certified Copy	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, 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

15 FEB -2 PH 6: 58
SLUCKLARY OF STATE
TALLAHASSEE, FLORIDA

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 Florida Department
of State is:	Luck Investments, LLC	
2. The Florida docu	ment/registration number assi	gned to this limited liability company is:
L14000110604		·
3. The date this men	mber/manager withdrew/resign	ned or will withdraw/resign is:
4. I, Anne C. Garber (Print Name of Person Resigning)		, hereby withdraw/resign as a
(Print No	ame of Person Resigning)	
AMBR'		
	(Print Title)	
of this limited liab resignation in wri		limited liability company has been notified of my
	Acase	
Signature of Dis	ssociating Member or Resigni	ng Manager
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	