L14000 1136 70

(Requestor's Name)				
(Address)				
(Address)				
·				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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C.M.8.14

COVER LETTER

TO: Registration Section Division of Corporations	:			
SUBJECT: SUBWAY 3883 I				
	(Name of Limited I	iability Co	ompany)	
The enclosed member, resignation	on or dissociation	and fee	(s) are submitted for t	filing.
Please return all correspondence concerning this matter to:			:	SECHLIANSS TALLAHASS
HERMAN SINGH				EVS.
(Contact Per	son)			. ***
HERMAN SINGH & ASSOCIATES INC				HESTATE BATE
(Firm/Comp	any)		<u> </u>	
600 RINEHART RD SUITE 3	3118			
(Address)				
LAKE MARY FL 32746				
(City/State and Z	Zip Code)			
For further information concern	ing this matter, p	lease call	!:	
HERMAN SINGH	at (407	831-1399	
(Name of Contact Person			le & Daytime Telephor	ne Number)
Enclosed please find a check ma \$25 Filing Fee	· ·		Department of State ag Fee & Certified Co	
STREET/COURIER ADDRE	SS:		MAILING ADDI	=
Registration Section			Registration Section	
Division of Corporations Clifton Building			Division of Corpo P.O. Box 6327	rations
2661 Executive Center Circle			Tallahassee, Florid	la 32314
Tallahassee, Florida 32301			7 an	ا 1 دسوني ووو

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)

	imited liability company as it a	appears on the records of the Florida Department
2. The Florida docur		gned to this limited liability company is:
3. The date this men	nber/manager withdrew/resign	ned or will withdraw/resign is: 7-18-2014
4. I, PAMILABEN PATEL (Print Name of Person Resigning)		
AMBR		
(1	Print Title)	
of this limited liab resignation in writ	- ·	imited liability company has been notified of my
Signature of Dis	osociating Member or Resignin	ng Manager
-	\$25.00 (Required) \$30.00 (Optional)	