114000142977

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone #	9)		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Name)		
(D	ocument Number)	<u> </u>		
Certified Copies	Certificates o	f Status		
Special Instructions to Filing Officer:				

Office Use Only



700297828547

04/17/17--01028--027 **25.00

COVER LETTER

TO: "Registration Section Division of Corporations

PRINCIPAL MERCHANT S' SUBJECT:	YSTEMS, LLC				
(Name of Limited Liability Company)					
The enclosed member, resignation or dissoc	iation and fee(s)	are submitted for filing.			
Please return all correspondence concerning	this matter to:				
RAHIM SURANI					
(Contact Person)					
PRINCIPAL MERCHANT SYSTEMS, LI	LC				
(Firm/Company)					
1931 NW 150 AVE, STE 242					
(Address)		•			
PEMBROKE PINES, FL 33028					
(City/State and Zip Code)		-			
For further information concerning this matter	ter, please call:				
RAHIM SURANI	972				
(Name of Contact Person)	at ((Area Code	& Daytime Telephone Number)			
Enclosed please find a check made payable \$25 Filing Fee		epartment of State for: Fee & Certified Copy			
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, Florida 32314			
Tallahassee, Florida 32301		rananassee, rionua 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)

PRI	limited liability company	as it appears on the records of the YSTEMS, LLC	Florida Department
2. The Florida doc L1400014297	· ·	r assigned to this limited liability c	ompany is:
3. The date this me	ember/manager withdrew/r	resigned or will withdraw/resign is	03/31/2017
4. I,	NAN HONG Name of Person Resigning)	, hereby withdraw/resign a	s a
MGRI	(Print Title)	··	
of this limited lia resignation in wr	bility company and affirm	the limited liability company has	been notified of my
Signature of D	issociating Member or Res	signing Manager	77 A
	\$25.00 (Required)		PR 17 PH 1* 2