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SECRETARY OF STATE
TALLAHASSEE FLORIDA
TALLAHASSEE FLORIDA

DEC - 9 2014 T. CARTER

COVER LETTER

TO: Registration Section Division of Corporati	ons		
SUBJECT: RESS W	ORTHY BEANS	os LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of Amend	iment and fee(s) are sub	omitted for filing.	
Please return all correspondence	concerning this matter	to the following:	
	Nick	Name of Person	
_		Name of Person	
	Pres	SWORTHY BRAND Firm/Company	s LLC
		Firm/Company	
	2147 NOTTI	NGHAM DRIVE	
		Address	
	WINTER I	PACK, FL 32792 City/State and Zip Code	
	NICK E PRES	SWORTHY REAMS. COM	<u> </u>
			notification)
For further information concern	ing this matter, please o	call:	
NICK LAWAGE	N	at (321) 229 Area Code Da	r-5208
Name of Person	ı	Area Code Da	ytime Telephone Number
Enclosed is a check for the follo	wing amount:		
\$25.00 Filing Fee	330.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

14 DEC - I PM 3: 33

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 lin	nited liability company as it appears on the records of the Florida Department
of State is: Pres	SWORTHY BRANDS, LLC
2. The Florida docum	ent/registration number assigned to this limited liability company is:
L14000159	429
3. The date this meml	ber/manager withdrew/resigned or will withdraw/resign is: 10/17/2014
4. I, DAVID SAV.	, hereby withdraw/resign as a e of Person Resigning)
MANAGER	int Title)
of this limited liabil resignation in writin	ity company and affirm the limited liability company has been notified of my ng.
0	
Signature of Disso	octating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)