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(Re	equestor's Name)				
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
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PERSTARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: AFTERDUM LLC (Name of Limited Liability Company)				
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Stacey Hogan (Contact Person)				
Afterburn LLC (Firm/Company)				
5034 Seminole Pratt Whitney Rd.				
LOXa hatchee, F1 33470 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Stacey Hogan at 501 512-8074 (Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclosed please find a check made payable to the Florida Department of State for: \$\sqrt{25}\$ Filing Fee \$\sqrt{25}\$ Filing Fee & Certified Copy				
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations				

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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)

	limited liability company as	••	of the Florida Department
	ument/registration number as	ssigned to this limited liab	oility company is:
	mber/manager withdrew/res	 igned or will withdraw/re:	sign is:
OL :1 D. L			
4. I, (Print Name of Person Resigning)		, nereby withdraw/re	sigii as a
Vice Presider			
	(Print Title)		
of this limited lia resignation in wr	bility company and affirm thiting.	e limited liability compan	y has been notified of my
Shari Robe	rta		
	ssociating Member or Resig	ning Manager	
—	\$25.00 (Required) \$30.00 (Optional)		TILED 2015 116 18 P 2 CRUTARY OF STA