## L14 000 164491

(Re	questor's Name)				
(Ad	dress)				
(Addiess)					
(Ad	(Address)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Do	cument Number)				
Certified Copies	Certificates	s of Status			
	_				
Special Instructions to	Filing Officer:	;			
		:			

Office Use Only



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## **COVER LETTER**

ŤO:	_	stration Section sion of Corporations			
SUBJ	ECT:	T: LUJO INVESTMENTS LLC  (Name of Limited Liability Company)			
The er	nclosed	l member. resignation or dis	sociation and fee(	s) are submitted for filing.	
Please	return	all correspondence concern	ing this matter to:		
Claudi	a L. Bur	rgoa			
		(Contact Person)		_	
Lujo Ir	nvestme	nts LLC			
		(Firm/Company)		_	
19463	NW 23	Place			
		(Address)		_	
Pembro	oke Pine	es. FL 33029			
	·	(City/State and Zip Code)		_	
For fu	rther in	nformation concerning this n	natter, please call:		
Claudi	a L. Bur	goa	954 at (	249-6676	
	(N	ame of Contact Person)		e & Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payat	ole to the Florida I	Department of State for:	
	5 Filing		🗆 \$55 Filin	g Fee & Certified Copy	
Ć	K#	138			
		ng Address:		Street Address:	
		stration Section sion of Corporations		Registration Section Division of Corporations	
		Box 6327		The Centre of Tallahassee	
		hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	



## LEORIDA 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)

	e limited liability company as UJO INVESTMENTS LLC	it appears on the records of the Florida Department
2. The Florida doc	cument registration number ass	signed to this limited liability company is:
		gned or will withdraw resign is:
4. 1. Susan K. Burgoo  (Print Name of Person Resigning)		. hereby withdraw resign as a
eProu	Name of Person Resigning)	
AMBR		
	(Print Title)	
resignation in w	riting.	fimited liability company has been notified of my
Signature of D	Vissociating Member of Resign	ing Manager
Filing Fee: Certified Copy	\$25.00 (Required) \$30.00 (Optional)	