LI4COO172254

(Requestor's Name)	
(Address)	
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PICK-UP WAIT	MAIL
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: <u>Cudjoe key</u>	Boat Rental LC (Name of Limited Liability Company)
The enclosed member, resignation	on or dissociation and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to:
Dillon Trussell (Contact Pers	on)
Cudjul Key Boat (Firm/Compa	Rentals
17183 Coral Dri (Address)	YE.
Sugarloaf Key F (City/State and Z	L 33042 ip Code)
For further information concerni	ng this matter, please call:
Dillon Trussell (Name of Contact Perso	at (305) 587-1614 (Area Code & Daytime Telephone Number)
Enclosed please find a check ma \$25 Filing Fee	ide payable to the Florida Department of State for:
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314



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	limited liability company as it appears on the records of the Florida Departmen
of State is: <u>Cu</u>	djoe Key Boat Rental L.L.C.
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L140001	72284
3. The date this men	mber/manager withdrew/resigned or will withdraw/resign is: 111120
	Roberson , hereby withdraw/resign as a
_manag	Print Title)
of this limited liab resignation in wri	bility company and affirm the limited liability company has been notified of my
Sulps	John S.
Signature of D	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
ceranica copy.	450.00 (Optional)