

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	ry/State/Zip/Phone	: #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



600291814476

11/16/17--01007--002 **25.00

D SCOTT NOV 1 7 2017



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 11, 2017

LB & A TURKU LLC 4725 SW 62 AVE 202 DAVIE, FL 33314

SUBJECT: LB & A TURKU LLC Ref. Number: L14000178290

We have received your document for LB & A TURKU LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 317A00020512

Dionne M Pijeaux Regulatory Specialist

CULL NOV 14 PHILE: 1:C



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	s it appears on the records of	the Florida Department
2. The Florida doci	_	ssigned to this limited liabili	ity company is:
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resig	gn is:
	RKU Tame of Person Resignings horized Member	, hereby withdraw/resi	gn as a
	(Print Title)		
of this limited lia resignation in wr		ne limited liability company	has been notified of my
Bled 5	JUL		2
Signature of Di	ssociating Member or Resig	gning Manager	
_	\$25.00 (Required) \$30.00 (Optional)		