U50003532

(Re	equestor's Name)			
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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SLOPE TO THE STATE STAT

DIS. 115/1198 APR 23 2015

R. WHILL

COVER LETTER

_	ion of Corporations		
SUBJECT:	Standard Living, LLC		
	(Name of Limit	ed Liability Cor	mpany)
The enclosed	l member, resignation or dissocia	tion and fee(s	e) are submitted for filing.
Please return	all correspondence concerning t	his matter to:	
Christian C	lyatt		
	(Contact Person)		_
Standard L	iving LLC		
	(Firm/Company)		_
1750 Missi	on Ct #2		
	(Address)		•
West Palm	Beach FL 33401		
	(City/State and Zip Code)		_
For further in	nformation concerning this matte	r, please call:	
Christian C	lyatt	56 1	385-0648
(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed ple \$25 Filing	ease find a check made payable to g Fee		Department of State for: g Fee & Certified Copy
STREET/Co	OURIER ADDRESS:		MAILING ADDRESS: Registration Section
~	Section Corporations		Division of Corporations
Clifton Build	ding		P.O. Box 6327
	ive Center Circle Florida 32301		Tallahassee, Florida 32314

CR2E079 (2/14)



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SECRETARS OF STATE 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 dard Living LLC	it appears on the records of the Florida Department
2. The Florida docu L1500000353	•	ssigned to this limited liability company is:
Developed Minimum	_	igned or will withdraw/resign is: March 31, 2015, hereby withdraw/resign as a
Manager	(Print Title)	
of this limited lial resignation in wr		e limited liability company has been notified of my
Signature of Di	Ssociating Member or Resig	ning Manager
•	\$25.00 (Required) \$30.00 (Optional)	·