L1500011372

(Requestor's Name)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Fresh Catch Music, LLC (Name of Limit	ted Liability Company)
The enclosed member, resignation or dissocia	tion and fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to:
Jose Rivera	
(Contact Person)	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
Fresh Catch Music, LLC	
(Firm/Company)	
1206 SW Albenga Ave	
(Address)	
Port St. Lucie, FL 34953	
(City/State and Zip Code)	
For further information concerning this matte	r, please call:
Jose Rivera	772 201.9162
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to □ \$25 Filing Fee	the Florida Department of State for: \$\square\$\$ \$\\$55\$ Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



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 Department
		it appears on the records	of the Fortal Department
of State is: Fres	h Catch Music,LLC		<u></u> '
2. The Florida docu	iment/registration number as	signed to this limited lia	bility company is:
L15000011372	2		
3. The date this me	mber/manager withdrew/res	igned or will withdraw/re	esign is: 02/28/2016
4. I, Daniel Couto		, hereby withdraw/r	esign as a
(Print N	ame of Person Resigning)	· · · · · · · · · · · · · · · · · · ·	_
Managing Me	mber		
	(Print Title)		
of this limited lial	bility company and affirm th	e limited liability compar	ny has been notified of my
resignation in-wri	iting.		
Signature of Di	ssociating Member or Resig	ning Manager	22
			2016 APR
Filing Fee:	\$25.00 (Required)		TARY ASSI
Certified Copy:	\$30.00 (Optional)		mo n
			TS P
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