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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Think Hits, LLC	
(Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to	:
Pierre Hachar, Esq.	
(Contact Person)	<del></del>
The Hachar Law Firm, P.A.	
(Firm/Company)	_
8100 Oak Lane Suite 401	
(Address)	<del></del>
Miami Lakes, FL 33016	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please call	l:
Nicolas Tevez, Esq. 786	200 - 1308
(Name of Contact Person) (Area Coc	le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  \$25 Filing Fee  \$55 Filing	Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	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 of State is:		is it appears on the records of the Florida Department
2. The Florida doct L1500001198		assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/re	signed or will withdraw/resign is:
4. 1, Day 10 T		hereby withdraw/resign as a
of this limited lia resignation in wr		he limited liability company has been notified of my
Signature of Di	ssociating Member or Resi	gning Manager
	\$25.00 (Required) \$30.00 (Optional)	7 JAW 30 F