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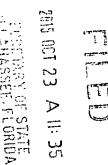
(Re	questor's Name)			
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## **COVER LETTER**

**Division of Corporations** Ultimate Sport Taekwondo (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Jaymie Perez (Contact Person) Tawnee Enterprises (Firm/Company) 3433 Lithia Pinecrest Rd Suite 358 (Address) Valrico, Fl 33596 (City/State and Zip Code) For further information concerning this matter, please call: Jaymie Perez (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section

**Division of Corporations** 

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Clifton Building

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, Florida 32301

TO:

**Registration Section** 



## 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 nate Sport Taekwondo LL	••	f the Florida Department
2. The Florida doc	ument/registration number as	signed to this limited liabil	ity company is:
3. The date this me	ember/manager withdrew/resi	igned or will withdraw/resigned	gn is:
	nee Enterprises , hereby withdraw/resign as a  (Print Name of Person Resigning)		
MGR			
<del> </del>	(Print Title)		
resignation in wr	L MK		has been notified of my
Signature of D	issociating Member or Resign	ning Manager	
l.			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		T 23 A III: 3