15000021960

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
, , , ,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Emily Name)		
(Document Number)		
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COVER LETTER

TO: Registration Section			
Division of Corporations			
CFD Enterprises			
SUBJECT: (Name of Limited Liability Company)			
(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:			
Lorenzo Muscaella			
(Contact Person)			
CFD Enterprises LLC			
(Firm/Company)			
(i interesting any)			
1121 East Commercial Blvd. #30			
(Address)			
Oakland Park Florida, 33334			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
Lorenzo Muscarella	954-483-02-04 at ()		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} 25 \int \text{Filing Fee} \text{\$\text{S5 Filing Fee} & Certified Copy} \end{align*}			
	2		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	Tundingsee, Horian 32317		

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 app	pears on the records of the Florida Department
of State is: CFD	Enterprises LLC	·
•		ed to this limited liability company is:
L1500002196	0	
3. The date this me	ember/manager withdrew/resigned	or will withdraw/resign is:
4. I,	scarella	, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	· ·
MGR		
	(Print Title)	
of this limited lial resignation in wr		ited liability company has been notified of my
antonina (1	Muscaulh	
Signature of Di	issociating Member or Resigning I	Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	