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(Ac	idress)			
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D. SCOTT NOV 2 9 2016

COVER LETTER

Division of Corporations	
SUBJECT: SISTEDATA LLC	
(Name of Limited Lia	bility Company)
The enclosed member, resignation or dissociation a	and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to:
Gloria Franco	
(Contact Person)	
GFF SERVICES LLC	SECRE
(Firm/Company)	NOV 28 AHASSE
5769 NW 113 CT	ARY OF STATE ASSEE, FLORIDA
. (Address)	LOR STA F.
Doral, FI 33178	02
(City/State and Zip Code)	
For further information concerning this matter, ple	ase call:
Gloria Franco	305 4584737
(Name of Contact Person) (A	rea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the □ \$25 Filing Fee ■ \$	Florida Department of State for: 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)

	limited liability company as	s it appears on the records of the	Florida Department
	_	ssigned to this limited liability co	ompany is:
L1500002274	1		
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:	12/08/2016
A 1 . 1		, hereby withdraw/resign as	
(Print N	ame of Person Resigning)		
Manager (MG	R)		
	(Print Title)		
of this limited lial resignation in wr		ne limited liability company has b	16 SECH TALLL
	ssecating Member or Resig	gning Manager	FILE NOV 28 RETARY OF AHASSEE,
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		4: 02