

LI5000021269

Fit Meal Plans LLC

(Requestor's Name)

331 Plaza Blvd.

(Address)

(Address)

Daytona Beach, FL 32118

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

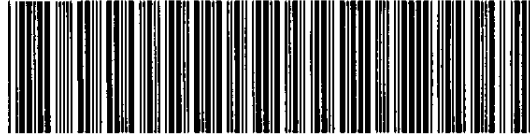
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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N. Culligan JUL 30 2015



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 of State is: Fit Meal Plans LLC

2. The Florida document/registration number assigned to this limited liability company is:

L15000027269

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/26/15

4. I, Kirk Girdley, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager (Managing Member)
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

X [Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)