115000144950

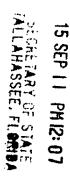
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700276893417

09/11/15--01010--008 **25.00



Y SULKER

SEP 1 5 2015

COVER LETTER

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

TO: Registration Section

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)

1. The name of the lin	mited liability company as it appears on the records of the Florida Department
of State is:	T. JOHN Fence LLC
2. The Florida docum	ent/registration number assigned to this limited liability company is:
L15000	044950 <u>F</u> 5
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: 10 50 20/5
4. I, Jenry (Print Nam	VENERUR, hereby withdraw/resign as a
<u>CFO</u>	rint Title)
	ity company and affirm the limited liability company has been notified of my
resignation in writi	ng.
Henry	Luna Jr.
Signature of Diss	ociating Member of Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)