## L15000053125

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(7)	- Figure	
(Bu:	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to I	Filing Officer:	





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(PRM 4-8-15

## **COVER LETTER**

TO: Registration Section		
Division of Corporations		<u>≥</u> ¢
·		
SUBJECT: Tramore Investments, LLC		
	ited Liability Co	ompany)
The enclosed member, resignation or dissocia	ation and fee(	s) are submitted for filing. $\frac{16}{22}$
Please return all correspondence concerning	this matter to	)TT
Donald Denkhaus		
(Contact Person)		<del></del>
Tramore Investments, LLC		
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	_
10225 SW 87th Court		
(Address)		<del>_</del>
Miami, FL 33176		
(City/State and Zip Code)		<del></del>
For further information concerning this matter	r, please call	:
Donald Denkhaus	305	415-6169
(Name of Contact Person)	· \	e & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida I	Department of State for:
\$25 Filing Fee	□ \$55 Filin	g Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314

CR2E079 (2/14)

Tallahassee, Florida 32301



## 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	e limited liability company as it appears on the records of the Florida Depar	rtment
of State is:	more Investments, LLC	<u></u> .
L1500005312	ument/registration number assigned to this limited liability company is:	
	ember/manager withdrew/resigned or will withdraw/resign is:	<b>.</b>
4. I, Garett Chist	wame of Person Resigning), hereby withdraw/resign as a	
Manager		
<del></del>	(Print Title)	
of this limited lia resignation in wi	ability company and affirm the limited liability company has been notified criting.	of my
Ganth	issociating Member or Resigning Manager	
Signature of D	issociating Member or Resigning Manager	
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	