USOOD67259

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		:		
	,			

Office Use Only



000277992040

10/13/15--01030--014 **25.00

FILED
SECRETARY OF STATE
MULIFALIASSEE, FEIGHBA

OCT 2 0 2015 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Bleen LLC			
	Limited Liability Co	ompany)	
The enclosed member, resignation or diss	sociation and feet	s) are submitted for filing.	
Please return all correspondence concerns	ing this matter to	:	
Raquel B Gross			
(Contact Person)	**************************************		
Esquire			
(Firm/Company)			
2612 Robert Trend Jones Dr #737			
(Address)	retractive to the control of the con	nesee	国治 ず
Orlando, FL. 32835			温 8 7
(City/State and Zip Code)		_	18 TE
For further information concerning this n	natter, please call	:	Ma a C
Raquel B Gross	407	9628212	FILEU BOT 19 PN # 58
(Name of Contact Person)	(Area Cod	e & Daytime Telephone Numb	per) 30 0
Enclosed please find a check made payab			
\$25 Filing Fee	□ 222 13110	g 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	

CR2F079 (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 of State is:	• • •	s it appears on the records of the Flor	rida Departm	ent
2. The Florida doc L1500006725	_	ssigned to this limited liability comp	any is:	
3. The date this mo	ember/manager withdrew/res	signed or will withdraw/resign is:	/05/2015	_
	treira Jr Jame of Person Resigning)	, hereby withdraw/resign as a		
of this limited lia resignation in wr	iting. Generale—	ne limited liability company has been	notified of r	ny Ř
Filing Fee:	issociating Member or Resig \$25,00 (Required) \$30,00 (Optional)	ming Manager	ETANCOF STATE AHASSEE, FEORING	