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Registration Section TO: Division of Corporations **FRK Petroleum LLC** SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: **Judith Cornelius Cole** (Contact Person) Judith Cornelius Cole CPA PA (Firm/Company) 6707 N Himes Ave (Address) Tampa, FL 33614 (City/State and Zip Code) For further information concerning this matter, please call: Fabio Kawanami (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee STREET/COURIER ADDRESS: **MAILING ADDRESS: Registration Section** Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314

Tallahassee, Florida 32301

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	it appears on the records of the	e Florida Depart	ment
2. The Florida doc:		ssigned to this limited liability	company is:	
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign i	is:	
4. I, Imran lftikhar (Print Name of Person Resigning)				
AMBR	une of 1 erson nesigning)			
	(Print Title)			
of this limited lia resignation in wr		e limited liability company has	s been notified o	fmy
	land			
Signature of Di	ssociating Member or Resig	ning Manager		
	\$25.00 (Required) \$30.00 (Optional)		2015 NOV -3 P 12: SECRETARY OF ST. SILLAHASSEE, FLO	

CR2E079 (2/14)