## 45000087502

(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:					



700320785307

12/10/18--01020--011 ++25.00

FILED B 30

Office Use Only

D. SCOTT DEC 1 4 2018

## **COVER LETTER**

CR2E079 (2/14)

TO:	Registration Section					
	Division of Corporations					
SUBJ						
	(Name of Limited Liability Company)					
The er	nclosed member, resignation or dissociation	on and fee(	s) are submitted	for filing.		
Please	return all correspondence concerning this	s matter to:				
Richa	ard K. Barra					
	(Contact Person)					
Scott	, Harris, Bryan, Barra & Jorgensen, P	. <b>A</b> .				
_	(Firm/Company)		<del></del>			
4400	PGA Boulevard, Suite 603					
	(Address)		_			
Palm	Beach Gardens, Florida 33410			200- 200-		
	(City/State and Zip Code)		<del></del>	AND DEC	~77	
For further information concerning this matter, please call:					, , , , , ,	
Richa	ard K. Barra	561	624-3900	ם ו		
	(Name of Contact Person)	(Area Code	e & Daytime Tele	phone Number	)	
	sed please find a check made payable to the Filing Fee		Department of S g Fee & Certifie			
STRE	ET/COURIER ADDRESS:		MAILING AI	DDRESS:		
_	ration Section		Registration S			
	on of Corporations		Division of Co	•		
	Clifton Building 2661 Executive Center Circle		P.O. Box 6327 Tallahassee, Florida 32314			
Tallahassee, Florida 32301			rananassee, r	1011Qa 32314		



## 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)

	e limited liability company as i	t appears on the records of the Florida Department
2. The Florida doc	ument/registration number ass	igned to this limited liability company is:
L1500008750	)2	
, , SUSAN M.	THIEMANN	gned or will withdraw/resign is
(Print)	Name of Person Resigning)	
Authorized N	lember	
- 6 d 1 - 12 - 14 - 14 '	(Print Title)	50 30 30 S
resignation in w		limited liability company has been notified of my
Signature of D	issociating Member or Resign	ing Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	