# L15000 120100

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
	·	

Office Use Only



600287086956

06/20/16--01043--005 \*\*25.00

SECRETARY OF STATE

45.

JUN 21 2016 S. YOUNG

#### **COVER LETTER**

Division of Corporations
SUBJECT: EVEN FLO LLC (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:
DOWALD E BOSWORTH (Contact Person)
EVEN FLO LLC (Firm/Company)
10938 CHESAPEAICE LANE W.
JACKSONVILLE, FL. 32257 (City/State and Zip Code)
For further information concerning this matter, please call:
Doward Roscubæth at (904) 600-8590 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

#### STREET/COURIER ADDRESS:

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

TO: Registration Section

CR2E079 (2/14)

\$25 Filing Fee

#### **MAILING ADDRESS:**

□ \$55 Filing Fee & Certified Copy

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 SECRETARY OF STATE AND TALL AND 20 AND 1: 01



### 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 limi	ited liability company as it appears on the records of the Florida Depart	me <b>nt</b>
of State is: EVE	en Flo LLC	JUN 20 —20
2. The Florida documer	nt/registration number assigned to this limited liability company is:	
L15000	0120100	AT .
3. The date this membe	er/manager withdrew/resigned or will withdraw/resign is: 6-3-1	جے ج
	of Person Resigning), hereby withdraw/resign as a	
PARTNER (Prim	z nt Title)	
of this limited liability resignation in writing	cy company and affirm the limited liability company has been notified of	of my
Signature of Dissoc	ciating Member or Resigning Manager	
_	\$25.00 (Required) \$30.00 (Ontional)	