## LIL 0000 78951

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: All Glass 4U 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:	
Randy Berner (Contact Person)	
All Glass & U LLC (Firm/Company)	
13/1 SE Dixie Highway  (Address)	
Stuart Fl 34994 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Randy Burner at (772) 475-3448 (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)	Georgia (
Enclosed please find a check made payable to the Florida Department of State for \$25 Filing Fee & Certified Copy \$25 Filing Fee & Certified Copy	2 mm
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	

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)

1. The name of the	limited liability company as it appears on the records of the Florida Department	artment
of State is:	1 Glass & U LLC	
2. The Florida docu	ument/registration number assigned to this limited liability company is:	
L16000	28951	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 1	0,2016
$\alpha$	, hereby withdraw/resign as a warme of Person Resigning)	•
AR/ou	Wher partner (Print Title)	
/	(Prim Title)	3
of this limited lial resignation in wri	ibility company and affirm the limited liability company has been notified	of my l
1-16	2 SSEE	
Signature of Di		0 12: 43
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	