116000032352

(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:			





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JUL 3 0 2018

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Green Way Distribution, LLC				
(Name of Limited Liability Company)				
The enclosed member, resignation or dissociati	on and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	s matter to:			
Seth Z. Joseph				
(Contact Person)		_		
Law Office of Seth Z. Joseph. P.A.				
(Firm/Company)		_		
255 Alhambra Circle, Suite 1250		_		
(Address)		_		
Coral Gables, Florida 33134				
(City/State and Zip Code)		_		
For further information concerning this matter, please call:				
Seth Z. Joseph	305 t (445-5383 & Daytime Telephone Number)		
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)		
Enclosed please find a check made payable to t ■ \$25 Filing Fee		Department of State for: Fee & Certified Copy		
STREET/COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
Clifton Building		P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301		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 S

(Pursuant to 605.0216, Florida Statutes)

1. The name of t	the limited liability company as	s it appears on the records of the Florida Department
of State is: G	reen Way Distribution, LLC	
2. The Florida d	ocument/registration number a	ssigned to this limited liability company is:
L16000032	2352	
3. The date this	member/manager withdrew/res	signed or will withdraw/resign is: July 24, 2018
4. I. David Guti	errez Garcia	, hereby withdraw/resign as a
(Prin	at Name of Person Resigning)	
Manager		
	(Print Title)	
of this limited resignation in		ne limited liability company has been notified of my
Signature of	Dissociating Member or Resig	ning Manager
Filing Fee:	\$25.00 (Required)	

Certified Copy:

\$30.00 (Optional)