L16000033421

(Ke	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	_ y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
		:
	Office Use Only	



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D. SCOTT AUG 1 1 2017

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Elite Products International, LI	C	
	d Liability Company)	
The enclosed member, resignation or dissociati	ion and fee(s) are submitted for filing.	
Please return all correspondence concerning th	is matter to:	
Shimon Fhima		
(Contact Person)		
Elite Products International, LLC.		
(Firm/Company)		
8411 West Oakland Park Blvd. Suite 201		
(Address)		
Sunrise, FL 33351	.,	
(City/State and Zip Code)	·. :	
For further information concerning this matter,	please call: من المحافظة المح	
Shimon Fhima	at (<u>954) 918-2646</u>	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to x\$25 Filing Fee	the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	

Division of Corporations

Tallahassee, Florida 32314

P.O. Box 6327

CR2E079 (2/14)

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301



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)

The name of the limited liability company as it appears on the records of the Florida Department of State is:

, tate 1.5		
1. Elite Products I	nternational, LLC.	
2. The Florida docu	ment/registration number assigned to this limited liability compa	anyis:
£16000033421.		_ <u>_</u> `
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: Jan	1 st 2017.
4. I. Gidon Douk (Print N	, hereby withdraw/resign as a ame of Person Resigning)	.) .
MGR	(Print Title)	
resignation in wri	ssociating Member or Resigning Manager	notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	