## L16000042935

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Special Instructions to I	Filing Officer:	
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Office Use Only

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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Southern Brothers 7 (Name of Limited Liability Con	Interiors LLC		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to:			
Jeffrey Dunhay Jr. (Contact Person)	-		
Southern Brothers Interiors	5 LLC		
(Address) 5941 John 1	Pitts		
Panama C+ty, Fla, 32404 (City/State and Zip Code)	_		
For further information concerning this matter, please call:			
Jeffrey Dunham at (850 (Name of Contact Person) (Area Code	814-517-3 3 & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida D \$25 Filing Fee \$55 Filing	Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS: 50		
Registration Section	Registration Section 😽 📗		
Division of Corporations	Division of Corporations		
Clifton Building	P.O. Box 6327		

Tallahassee, Florida 323 14

CR2E079 (2/14)

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)

1. The name of the lin	nited liability company as it appears on the records of the Florida De	partment
of State is: 500	thern Brothers Interiors 11C	<u> </u>
2. The Florida docum	ent/registration number assigned to this limited liability company is:	
L160000	42935	
	per/manager withdrew/resigned or will withdraw/resign is: 10/19	12017
4.1. Jeffrey (Print Nam	Dunham Jr, hereby withdraw/resign as a e of Person Resigning.	
Partner	23.7	(;)
of this limited liabil resignation in writing	ity company and affirm the limited liability company has been notified.	ed of my
Jeffrey	Occiating Member or Resigning Manager	
Sighyature of Disso	ociating Member or Resigning Manager	1
Filing Fee:	\$25.00 (Required)	I
Certified Copy:	\$30.00 (Optional)	