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(Re	questor's Name)		
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JAN 31 2017 S. YOUNG 17 JAN 30 PH 5: 26

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Whisthe faculting 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:	
Luke Ptcler (Contact Person)	
whistle Recounting LLC (Firm/Company)	TĂLL.
6903 Cormorant Circle	17 JAN 30 PM 5: 26
Cotton wood Heights Utah 84121 (City/State and Zip Code)	PM 5: 26
For further information concerning this matter, please call:	
Auke littler at (574) 520-3776 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for: 2 \$25 Filing Fee	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327	

Tallahassee, Florida 32314

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)

	limited liability company as it appears on the records of the Florid	a Departn	nent
of State is: _ &	shittle Recruiting LLC		·
2. The Florida docu	ument/registration number assigned to this limited liability compan	y is:	
160	000 72422		
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: $\mathcal{O}\mathcal{E}$	19,201	16
4. I, <u>Larry</u> (Print N	Ame of Person Resigning), hereby withdraw/resign as a	7	SEL
M	SR (Print Title)	JAN 30	ATTARA
	bility company and affirm the limited liability company has been n	otified of	my A
resignation in wr	Ling.	5: 26	STATE
Signature of Di	ssociating Member or Resigning Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		