## L16 000 112423

(Re	questor's Name)	<del> </del>	
(Ad	dress)		
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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Lisa Winter



JUL 29 2016 N. CAUSSEAUX

## **COVER LETTER**

Tallahassee, Florida 32301

CR2E079 (2/14)

TO: Registration Section			
Division of Corporations			
SUBJECT: WINTER RAN (Name of Lim	C4 LLC ited Liability Company)		
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.			
Please return all correspondence concerning	this matter to:		
RYAN WINTER (Contact Person)			
(Contact Person)	<del></del>		
WINTER RANCH LLC (Firm/Company)			
(Firm/Company)			
12251 OLD RODEO De.			
(Address)			
ALV4, FL 33920			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
RYAN WINTER (Name of Contact Person)	at (508) 247-1938		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for:			
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		



## 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
of State is:	INTER RANCH	LLC.
2. The Florida docu	ument/registration number assig	gned to this limited liability company is:
L16000	5 112423	<u></u> .
3. The date this me	mber/manager withdrew/resign	ned or will withdraw/resign is: 7/27/2016
		, hereby withdraw/resign as a
<u>MGR -</u>	- MBR (Print Title)	
of this limited lia resignation in wr		imited liability company has been notified of my
	( Dinton	
Signature of Di	ssociating Member or Resignir	ng Manager
Filing Fee:	\$25.00 (Required)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	\$30.00 (Nequired)	ng Manager  ALL MASSET FI ORIDE  TALL MASSET FI ORIDE
		3: 08