## L16000 116630

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## **COVER LETTER** ·

TO:	_	stration Section sion of Corporations				
	5	·				
SUBJ	ECT:	LGBAM LLC				
		(Name of Limited Liability Company)				
The e	nclosed	d member, resignation or diss	ociation and	fee(s)	) are submitted for filing.	
Please	returr	all correspondence concern	ing this matte	r to:		
Gregg	Barbaga	tilo				
_		(Contact Person)	· · · · · · · ·		•	
LGBA	M LLC					
		(Firm/Company)			-	
2200 N	Comm	erce Pkwy #200				
		(Address)			-	
Westor	n, FL 33	326				
		(City/State and Zip Code)	<u> </u>		•	
For fu	rther is	nformation concerning this m	atter, please	call:		
Kat Cu	rtiellas		305 at (		573-1577	
	(N	ame of Contact Person)			& Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payab	le to the Flor	ida D	epartment of State for:	
<b>=</b> \$2:	5 Filing	g Fee	□ <b>\$</b> 55 F	Filing	Fee & Certified Copy	
	Mailir	ng Address:			Street Address:	
	Regis	stration Section			Registration Section	
		ion of Corporations			Division of Corporations	
		Box 6327			The Centre of Tallahassee	
	i alla	hassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

CR2E079 (2/14)



## 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 l		ears on the records of the Florida Department
2. The Florida docu L16000116630	ment/registration number assigned	to this limited liability company is:
4. I, Louis Meltzer	APPROVED	or will withdraw/resign is: 12/07/2020 hereby withdraw/resign as a
,		ted liability company has been notified of my
Ü	APPROVED  By Louis Meltzer at 3:05 pm, Dec	: 07, 2020
Signature of Dis	ssociating Member or Resigning N	DEC
	\$25.00 (Required) \$30.00 (Optional)	18 AH 8: 1