10/14/2016 04:35 235-939-2280 Division of Corporations

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Phone Fax Number	(239) 939-2222 (239) 939-2280	

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Encil Address: Mwickera lawcrw.com

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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:	SWFL, LLC	ا منتخب مراجع	<u></u>	
2. The Florida document/registration number as L16000] G I OO f		y 13 A 6,3	016 OCT 11	
3. The date this member/manager withdrew/resi 4. LAWRENCE P. PAYNE	gned or will withdraw/resign is: 10		<u>1</u> <u>2</u>	
(Print Name of Person Resigning) MANAGER & MEMBER		Ă	μ Υ	

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Piling Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)

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