## L16 000161478

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/Glate/Zip/Filone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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06/25/28--01010--005 ≉≉35.00



SE? 15 TO

## **COVER LETTER**

Division of Corporations	
SUBJECT: £17 Ynt LLC (Name of Limited Liability C	ompany)
The enclosed member, resignation or dissociation and fee	e(s) are submitted for filing.
Please return all correspondence concerning this matter to	):
Reginald Bruster (Contact Person)	
Err Yut LLC (Firm/Company)	
600 University Office &3	
Pensacula, FL 32504 (City/State and Zip Code)	
For further information concerning this matter, please cal	l:
Appinul Bruster at (150 (Name of Contact Person) (Area Co	de & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  ☐ \$25 Filing Fee  ☐ \$55 Fili	Department of State for: ng Fee & Certified Copy
Mailing Address; Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

Tallahassee, FL 32303



## 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 th	e limited liability company as	it appears on the records of the	he Florida Department
of State is:	ir Yut LLC	<del></del>	
2. The Florida do	cument/registration number ass	signed to this limited liability	company is:
416.0001	61478	·	ı
3. The date this n	nember/manager withdrew/resig	gned or will withdraw/resign	is: 6/30/1020
	M Kenz. & Name of Person Resigning)		
Anthoriz	Print Title)		
of this limited li resignation in w	ability company and affirm the riting.	e limited liability companý ha	as been notified of my
Wat.	WM .		
Signature of I	Dissociating Member or Resign	ning Manager	
Filing Fee:	\$25.00 (Required)		020 SE

Certified Copy:

\$30.00 (Optional)