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## **COVER LETTER**

TO: Registration Section

CR2E079 (2/14)

Division of Corporations		
Themis Law Firm LLC SUBJECT:		
	nited Liability Cor	mpany)
The enclosed member, resignation or dissoc	iation and fee(s	s) are submitted for filing.
Please return all correspondence concerning	this matter to:	
Michael I. Feldman		
(Contact Person)		_
Themis Law Firm, LLC		
(Firm/Company)	· · ·	_
800 Brickell Ave., Suite 1501		
(Address)		<del></del>
Miami, FL 33131		
(City/State and Zip Code)		<del></del>
For further information concerning this matt	er, please call:	
Michael I Feldman	305	9927047
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
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)

		s it appears on the records of the Fl	lorida Departme	nt
2. The Florida docu L16000163236	_	ssigned to this limited liability con	npany is:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:	September 15,	201(
4. I,	7	, hereby withdraw/resign as a		
Member	ume of Ferson Kesigning)			
	(Print Title)			
of this limited liab resignation in wri	• • •	ne limited liability company has be	en notified of m	y
. ~			•	
Ra				
Signature of Di	ssociating Member or Resig	gning Manager		
_	\$25.00 (Required) \$30.00 (Optional)		16 SEP 22 PH 1:	FILED