## L16 000191621

(Requestor's Name)					
(Address)					
(Address)					
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, , , , ,					
PICK-UP WAIT MAIL					
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J. HARRIS

## **COVER LETTER**

	Legistration Section		
L	Division of Corporations		
SUBJEC	The One Group United, Ll	_C	
50000		imited Liability Cor	mpany)
The encl	osed member, resignation or disso	ociation and fee(	s) are submitted for filing.
Please re	turn all correspondence concernir	ig this matter to:	
Tyler Mi	ielke		
	(Contact Person)		_
The On	e Group		
	(Firm/Company)		_
618 N B	Burkhardt Rd.		
	(Address)		_
Evansvi	ille, IN 47715		
	(City/State and Zip Code)		_
For furth	er information concerning this ma	itter, please call:	
Frederic	ck Shultz	812	774-5706
<del></del>	(Name of Contact Person)		& Daytime Telephone Number)
Enclosed	I please find a check made payable iling Fee		Department of State for: g Fee & Certified Copy
Registrat	T/COURIER ADDRESS: ion Section of Corporations Building		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
	ecutive Center Circle see, Florida 32301		Tallahassee, Florida 32314

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	limited liability company as	s it appears on the records of the	Florida Departme	ent
of State is:	One Group United, LLC			_·
2. The Florida docs L1600019162	_	ssigned to this limited liability co	ompany is:	
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	06/01/2018	_
4. I. (Print Name of Person Resigning)				
Manager	and ty terminating mig/			
	(Print Title)			
of this limited lia resignation in wr		ne limited liability company has b	oeen notified of m	ıy
J.	log el		2010	7 44
Signature of Di	ssociating Member or Resig	gning Manager		1072 1072 1014
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		1	