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(Daylosted Name)
(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

Division of Corporations		
Prayer is Good LLC		
·	imited Liability C	ompany)
The enclosed member, resignation or disso	ciation and fee	e(s) are submitted for filing.
Please return all correspondence concerning	g this matter to) :
Brette Petway		
(Contact Person)		
Prayer is Good		
(Firm/Company)		
1015 Atlantic Blvd Suite 111		
(Address)		
Atlantic Beach, FL 32233		
(City/State and Zip Code)	······································	
For further information concerning this ma	atter, please cal	1:
Brette Petway	303	517-0518
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee		Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314

CR2E079 (2/14)

TO: Registration Section



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)

	limited liability company as er Is Good LLC	s it appears on the records of the	e Florida D	Pepartr	nent
2. The Florida docu L1600019246	•	ssigned to this limited liability o	company is	s:	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign i	s:	2018	
Ion Otto		, hereby withdraw/resign			
(Print N MGR	ame of Person Resigning)				
	(Print Title)				
of this limited lial resignation in wr		ne limited liability company has	been noti	fied of	`my
La-Ot	∇				
Signature of Di	ssociating Member or Resig	gning Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		ALL AHASS	2018 JUL - (ر سَمَر