## L16000228505

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| Certified Copies             | Certificates of Status |      |  |  |
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Office Use Only



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S. YOUNG

## **COVER LETTER**

**Division of Corporations** INFINITY WORLDWIDE, LLC. SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Tyler Howard (Contact Person) Infinity Worldwide, LLC. (Firm/Company) 4811 Lyons Tech Pkwv (Address) Coconut Creek, FL 33073 (City/State and Zip Code) For further information concerning this matter, please call: Tyler Howard (Area Code & Davtime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee
Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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)

| 1                                       | e limited liability company a<br>nfinity Worldwide, LLC.            |   | of the Florida Departme  | nt<br> |
|---|---|---|--------------------------|--------|
| 2. The Florida doc<br>L160002285        | ument/registration number a   | ssigned to this limited liab                    | ility company is:        |        |
| 4. IJim Howard                          | ember/manager withdrew/res  | signed or will withdraw/res, hereby withdraw/re |                          | •      |
| Manager                                 | (Print Title)   |   |                          |        |
| of this limited lia<br>resignation in w | ability company and affirm the                                      | he limited liability compan                     | y has been notified of m | ıv     |
| _                                       | Secondating Member or Resigns \$25.00 (Required) \$30.00 (Optional) | gning Manager                                   | CT -9 PH 4:              | :      |