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## **COVER LETTER**

Tallahassee, Florida 32301

CR2E079 (2/14)

TO: Registration Section Division of Corporations
SUBJECT: MZF Mile Zero Fights LLC (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:
Karli Thurston (Contact Person)
mz F Mik Zero Fights (Firm/Company)
5455 Macdonald Ave #30 (Address)
Key West, FL 33040 (City/State and Zip Code)
For further information concerning this matter, please call:
Karli Thurston at (305 ) 906 0653 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sim \sim \sim \sim \sim \sim \sim \sim
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314



## 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 it appears on the records of the Florida Department
of State is:	ozemie Zero Fights
2. The Florida docu	iment/registration number assigned to this limited liability company is:
_L1600	233694
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: June 1, 201
	hereby withdraw/resign as a ame of Person Resigning)
auner	(Print Title)
of this limited liab resignation in wri	oility company and affirm the limited liability company has been notified of my ting.
	erz
Signature of Di	ssociating Member or Resigning Manager_
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)
Certifica Copy.	ψουνο (Οριισιαι)