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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 2114 Javestment Droup 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:
Robert Hunter (Contact Person)
2114 Javestment Japan LLC (Firm Company)
1835 NE Mismi Mandens Dr. # 152
N. Miama Brock Fo 33179 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (305) 495.8873 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_\$ \$55 \text{ Filing Fee & Certified Copy}\$\$\$
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle 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)

1. The name of the limited liability company as it appears on the records of the Flor	ida Department
of State is: 2. The Florida document/registration number assigned to this limited liability comp	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. I,	4419
(Print Title) of this limited liability company and affirm the limited liability company has becresignation in writing.	en notified of my
Signature of Dissociating Member or Resigning Manager	PILE THE
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	ED AN 7: 17