L17000012083

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COVER LETTER

TO:	Registration Section			
	Division of Corporations			
SUBJ	THE THING LLC JECT:			
	(Name of I	limited Liability Co.	mpany)	
The e	nclosed member, resignation or disse	ociation and fee(s) are submitted for filing.	
Please	e return all correspondence concerni	ng this matter to:		
Dani	el T. Ruke			
	(Contact Person)		_	
	(Firm/Company)		_	
3454	Bay Meadow Ct.			
	(Address)		_	
Wind	dermere, FL, 34786			
	(City/State and Zip Code)		_	
For fi	urther information concerning this ma	atter, please call:		
Dani	el T. Ruke	407 at (408-2044	
*	(Name of Contact Person)		& Daytime Telephone Number)	
	sed please find a check made payabl 5 Filing Fee		Department of State for: g Fee & Certified Copy	
	EET/COURIER ADDRESS:		MAILING ADDRESS:	
_	tration Section ion of Corporations		Registration Section Division of Corporations	
	non of Corporations on Building		P.O. Box 6327	
	Executive Center Circle		Tallahassee, Florida 32314	
Tallah	passee Florida 32301			

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)

THE	limited liability company as in THING LLC	t appears on the records of the	Florida Department
2. The Florida doct L1700001208		signed to this limited liability ed	<u></u> ,
3. The date this member/manager withdrew/resign Daniel T. Ruke 4. 1. (Print Name of Person Resigning)		ν. Σ	SS
Manager	(Print Title)		STATE STATE
resignation in wr		limited liability company has to	seen notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		