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(Red	questor's Name)			
(Add	dress)			
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Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer:				
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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	s it appears on the record	s of the Florida Department
of State is:	The Southern i	lig, LLC	
	ument/registration number a	U	ability company is:
	00 19785	-	
<u> L 1700C</u>	0 19785	·	, /
3. The date this me	mber/manager withdrew/res	signed or will withdraw/r	resign is: <u>10/4//7</u>
4. I. <u>Donnet</u> Print N	ta Stafford Jame of Person Resigning)	, hereby withdraw/	resign as a
MgR	(Print Title)		
of this limited lial resignation in wr	bility company and affirm thiting.	ne limited liability compa	any has been notified of my
Lonnetti Signature of Di	ssociating Member or Resig	mine Manager	
- B		,g	~
Filing Fee:	\$25.00 (Required)		7 00
Certified Copy:	•		第47 四
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