# 17000032656

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

A&M Phoenix Group 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:

Annisha J.Battle

J.

(Contact Person)

A&M Phoenix Group LLC

(Firm/Company)

9506 SW 41 Street Apt 208

(Address)

Miramar, Florida 33025

(City/State and Zip Code)

For further information concerning this matter, please call:

 Maredalena Joseph
 954
 790-9715

 (Name of Contact Person)
 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Depariment of State for: \$\Box\$ \$\\$25 Filing Fee & Certified Copy

STREET/COURTER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



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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 it appears on the records of the Florida Department of State is: \_\_\_\_\_
- 2. The Florida document/registration number assigned to this limited liability company is:

81-5358564 L17000032656

- 3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/31/2017
- Mario A Gray 4. I, \_\_\_\_

, hereby withdraw/resign as a (Print Name of Person Resigning)

Vice-Operating Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)