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(Requestor's Name)							
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PICK-UP	☐ WAIT	MAIL					
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COVER LETTER

CR2E079 (2/14)

_	stration Section sion of Corporations				
SUBJECT:	ATOMIC COWBOY, LLC	C.			
	(Name of	f Limited Liability Cor	mpany)		
The enclosed	d member, resignation or dis	ssociation and fee(s	s) are submitted fo	or filing.	
Please return	n all correspondence concern	ning this matter to:			
CHARLES	LEE				
	(Contact Person)		_		
	(Firm/Company)		_		
399 ASHF	ORD AVE.				
	(Address)		_		
SAN CARL	_OS, CA. 94070				
	(City/State and Zip Code)		_		
For further in	nformation concerning this r	matter, please call:			
CHARLES	LEE	305	878-4441	THE COLUMN THE PARTY OF THE PAR	-11
(N	Name of Contact Person)		e & Daytime Teleph	ione Number)	Earling Earling
Enclosed ple ■ \$25 Filing	ease find a check made payal g Fee		Department of Star g Fee & Certified		177 27
	OURIER ADDRESS:		MAILING ADI Registration Sec	DRESS:	•
Registration Division of 0	Corporations		Division of Corp		
Clifton Build	-		P.O. Box 6327		
	tive Center Circle Florida 32301		Tallahassee, Flo	rida 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	f the Florida Department
of State is:	OMIC COWBOY, LLC.		
2. The Florida doc	ument/registration number as 9	ssigned to this limited liabil	ity company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resig	gn is:
4. I, CHARLES L	EE /ame of Person Resigning)		
MEMBER	tume of Person Resigning)		
of this limited lia resignation in wr	(Print Title) bility company and affirm the iting. issociating Member or Resig		has been notified of my
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		