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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: MERIDIAN SALES GROUP	, LLC
SUBJECT: (Name of Lim	ited Liability Company)
The enclosed member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
MICHAEL WALBURN	
(Contact Person)	
MERIDIAN SALES GROUP, LLC	
(Firm/Company)	
1706 CAPTIVA DR.	
(Address)	
OLDSMAR, FL 34677	
(City/State and Zip Code)	<del></del>
For further information concerning this matt	er, please call:
MICHAEL WALBURN	_at () 743-5354 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable t \$25 Filing Fee	o the Florida Department of State for: ■ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahasses, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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)

	limited liability company as	• •	of the Florida Department
2. The Florida doc L1700008061	ument/registration number as	ssigned to this limited lial	bility company is:
KARINICIAY	ember/manager withdrew/res VERIA Vame of Person Resigning)		
MEMBER	(Print Title)		
resignation in wr	bility company and affirm the iting.  issociating Member or Resig	<u> </u>	ny has been notified of my
=	\$25.00 (Required) \$30.00 (Optional)		F 18 PR 4