## 1170000 80613

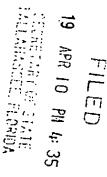
(Re	equestor's Name)				
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## **COVER LETTER**

ТО:	_	stration Section ion of Corporations				
SUBJ	ECT:	Meridian Sales Group, LLC				
		(Name of I	Limited Liability Con	npany)		
The er	nclosed	l member, resignation or disse	ociation and fee(s	) are submitted for filing.		
Please	return	all correspondence concerni	ng this matter to:			
Mike	Walbu	ırn				
		(Contact Person)	<del></del>	_		
Merid	lian Sa	ales Group, LLC				
		(Firm/Company)		-		
1706	Captiv	va Drive				
	-	(Address)	<u> </u>	-		
Oldsr	mar, Fi	L 34677				
		(City/State and Zip Code)	<del></del>	-		
For fu	rther in	nformation concerning this m	atter, please call:			
Mike	Walbu	ırn	813 at (	743-5354		
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)		
	sed ple Filing	ase find a check made payabl Fee		epartment of State for: Fee & Certified Copy		
		OURIER ADDRESS:		MAILING ADDRESS:		
_		Section Corporations		Registration Section Division of Corporations		
Cliftor	n Build	ing		P.O. Box 6327		
		ve Center Circle Florida 32301		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)

Julia	limited liability company as Torres	it appears on the records of the	Florida Department
2. The Florida doc L1700008061		ssigned to this limited liability c	rompany is:
Julia Torros		igned or will withdraw/resign is, hereby withdraw/resign a	
Member	(Print Title)		
of this limited lia resignation in wr		e limited liability company has	been notified of my
Signature of D	ssociating Member or Resign	ting Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		