

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wolfpack Boxing Club LLC
(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:

Jacob Poss
(Contact Person)

Wolfpack Boxing Club LLC
(Firm/Company)

8753 SW 131st
(Address)

Miami, FL 33176
(City/State and Zip Code)

For further information concerning this matter, please call:

Lyanne Loriz at (703) 209-7685
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

STREET/COURIER 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



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: Wolfpack Boxing Club LLC

2. The Florida document/registration number assigned to this limited liability company is:
L17000103335

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/28/17

4. I, David Gomez, hereby withdraw/resign as a
(Print Name of Person Resigning)

Managing Member
(Print Title)

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

X [Signature]
Signature of Dissociating Member or Resigning Manager

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

2017 OCT -6 PM 2:59
FALL 2017