

L17000130916

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

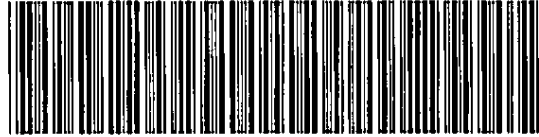
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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09/28/18 12:57

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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: JJSHANE LLC

2. The Florida document/registration number assigned to this limited liability company is:
H17000161515

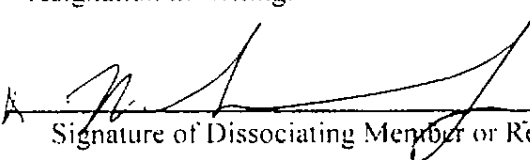
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/20/18

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

MEMBER

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

**Resignation of Member, Managing Member or Manager from a
Limited Liability Company (LLC)**

1. The name of the limited liability company as it appears on the records:

JJSHANE LLC

2. This limited liability company was organized under the laws of:

FLORIDA

3. The registration number of this limited liability company is:


H17000161515

4. I, MOHAMMAD HAGHIGHI, hereby resign as a MEMBER

(Print Name of Person Resigning)

(Print Title)

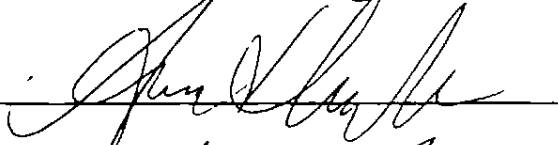
of this limited liability company and will not receive a buyout of any amount or consideration of any kind and do hereby swear that the above mentioned limited liability company has been notified of my resignation in writing.


Signature of Resigning Member, Managing Member or Manager

Date

9/24/18

Witness #1)



Witness #2)



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09/28/18