

C17000134438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

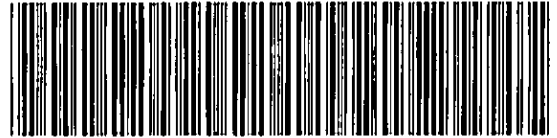
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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18 JUN 25 PM 4:30

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J. J. EGGETT
JUN 26 2018

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 6/25/18

NAME: ASP INVESTMENTS LLC

TYPE OF FILING: DISSOCIATION OR RESIGNATION (DEULAN)

COST: 25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A handwritten signature in black ink, appearing to read "a Hodge", is written over the printed name "ABBIE/PAUL HODGE". The signature is cursive and stylized.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ASP Investments 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:

Adam Bessen

(Contact Person)

Law Office of Adam Bessen

(Firm/Company)

20283 State Rd 7, Suite 400

(Address)

Boca Raton, FL 33498

(City/State and Zip Code)

For further information concerning this matter, please call:

Adam Bessen

(Name of Contact Person)

at (561) 482-9493

(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: ASP Investments LLC

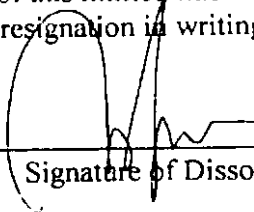
2. The Florida document/registration number assigned to this limited liability company is:
L17000134438

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 31 2018

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

Manager
(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)