L17000139232

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BECALLOWY OF STATE

D. BRUCE SEP 07 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: G & J DISCOVER, LLC	
(Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to	:
GUSTAVO SANDOVAL	
(Contact Person)	_
G & J DISCOVER, LLC	
(Firm/Company)	20]. גאָנ זאָנ
40 SW 13th STREET, UNIT 1003	2010 AUG 30 PH 3: E- SECRETARY OF STATE ALLAHASSEE-FLORID
(Address)	30 SSE SSE
MIAMI, FL 33129	G30 P# 3: 27 TARY OF STATE TASSEEFFLORIDA
(City/State and Zip Code)	— SS 4
For further information concerning this matter, please call	
GUSTAVO SANDOVAL 786	303-7732
	le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee \$55 Filing	Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, 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)

	limited liability company as J DISCOVER, LLC		the Florida Department
2. The Florida docu L1700013923	ument/registration number ass 2	signed to this limited liabili	ty company is:
3. The date this me	mber/manager withdrew/resign	gned or will withdraw/resig	gn is:
4. I, GUSTAVO S	SANDOVAL Same of Person Resigning)	, hereby withdraw/resi	gn as a
MANAGER	, , ,		
	(Print Title)		
resignation in wr	- free		has been notified of my
Signature of Di	ssociating Member or Resign	ing Manager	
	\$25.00 (Required) \$30.00 (Optional)		STATE LORIDA