L170002045/4

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	Registration Section	
	Division of Corporations .	•
SUBJE		
	(Name of Limited Liability Co.	mpany)
The end	closed member, resignation or dissociation and fee(s) are submitted for filing.
Please t	return all correspondence concerning this matter to:	
Stever	n Goerke, Esq.	
	(Contact Person)	
McRae	e Law Offices, P.A.	
	(Firm/Company)	-
5300 V	V Atlantic Ave #412	
	(Address)	_
Delray	Beach FL 33484	
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For furt	ther information concerning this matter, please call:	
Stever	n Goerke, Esq. 561	6386600
	(Name of Contact Person) (Area Code	& Daytime Telephone Number)
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Registra Divisio Clifton 2661 E:	ET/COURIER ADDRESS: ation Section n of Corporations Building secutive Center Circle ssee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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)

	mited liability company as	it appears on the records of the FRNATIONAL L.L.C.	Florida Dep	partme	nt -
2. The Florida docum L17000204514	nent/registration number as	signed to this limited liability co	mpany is:		
4. I. RANDY L BEE (Print Nan	LER ne of Person Resigning)	gned or will withdraw/resign is:, hereby withdraw/resign as		2018 APR	-
of this limited liabil resignation in writi Randy J		e limited liability company has b	TARYOU STAIL ASSEMFLORIDA		יר רי רי רי
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				