

04 23 '18 13:43 FROM SCOTT HARRIS ETAL 501 024 3533
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : SCOTT, HARRIS, BRYAN, BARRA & JORGENSEN, PA
Account Number : 070674001534
Phone : (561) 624-3900
Fax Number : (561) 624-3533

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: rkbarra@scott-harris.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
MAGNI BUSINESS WORKS, LLC

Certificate of Status	0
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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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)

FILED
18 APR 23 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Magni Business Works, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L17000227585

3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 17, 2018

4. I, Sara M. Calhoun, hereby withdraw/resign as a
(Print Name of Person Resigning)
authorized 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)

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