L17000229996

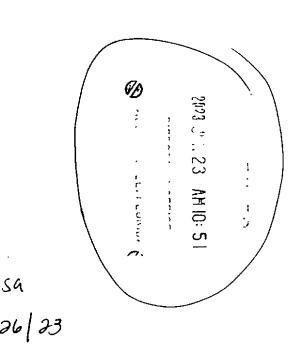
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PICK-UP	WAIT MAIL
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	(Business Entity Name)
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Special Instructions to	Filing Officer
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	Office Use Only



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COVER LETTER

TO: Registration Division of C							
SUBJECT: For the	Table Happy Motoring J	V, LLC					
	(Name of Limited Liability Company)						
The enclosed memb	er, resignation or dis	sociation :	and fee(s) are submitted for filing.			
Please return all corr	respondence concern	ning this m	atter to:	:			
Jack E. Kiker, III. Esq.							
	(Contact Person)			_			
WilliamsGautier Law							
	(Firm/Company)			_			
2010 Delta Blvd.							
·	(Address)	_		_			
Tallahassee, Florida 323	303						
- (City/State and Zip Code)			_			
For further informat	ion concerning this r	natter, ple	ase call	:			
Jack E. Kiker, III			50	386-3300			
(Name of (Contact Person)	(A	rea Cod	e & Daytime Telephone Number)			
•	d a check made payal			Department of State for:			
■ \$25 Filing Fee		□ S	55 Filin	ng Fee & Certified Copy			
Mailing Addre				Street Address:			
Registration	Section Corporations			Registration Section Division of Corporations			
P.O. Box 63				The Centre of Tallahassee			
Tallahassee.	FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

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)

For th	limited liability company as e Table Happy Motoring JV, LLC		of the Florida Department
2. The Florida docu L17000229996	iment/registration number as:	signed to this limited liabi	lity company is:
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resi	ign is:
By: Jack E. Kiker,			
	(Print Title)		
of this limited lial resignation in wr	bility company and affirm the iting.	e limited liability company	v has been notified of my
Gy:	The nameon		200
Signature of Di	ssociating Member or Resign	ning Manager	<u>. </u>
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		23 PM 2:31