## 117000241124

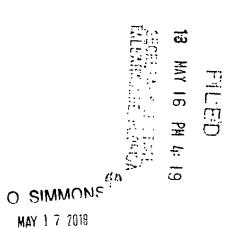
(Requestor's Name)  (Address)  (Address)
(Äddress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	B-BOYS FITNESS,LLC		
		ited Liability Cor	npany)
The er	nclosed member, resignation or dissocia	ation and fee(s	s) are submitted for filing.
Please	e return all correspondence concerning	this matter to:	
Melo	dy Lankford		
	(Contact Person)	1	_
LANK	(FORD LAW FIRM		
-	(Firm/Company)		_
140 5	South Beach Street, Suite 310		
	(Address)		_
Dayto	ona Beach, Florida 32114		
	(City/State and Zip Code)		_
For ft	orther information concerning this matte	er, please call:	
Melo	dy Lankford	850 at (	264-7004
	(Name of Contact Person)		e & Daytime Telephone Number)
	osed please find a check made payable t 5 Filing Fee	o the Florida   \$55 Filin	Department of State for: g Fee & Certified Copy
	EET/COURIER ADDRESS:		MAILING ADDRESS: Registration Section
_	stration Section ion of Corporations		Division of Corporations
Clifto	on Building		P.O. Box 6327
	Executive Center Circle hassee, 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)

. The Florida document/registration number	assigned to this limited liability company is:
L17000241124	·
. The date this member/manager withdrew/i	May-25-2018 resigned or will withdraw/resign is:
Millard Boden	, hereby withdraw/resign as a
(Print Name of Person Resigning)	
MGM Vice MGM	
(Print Title)	-
of this limited liability company and affirm resignation in writing.	signing Manager

\$25.00 (Required) \$30.00 (Optional)

Filing Fee:

Certified Copy: