# 117000260505

(Rec	questor's Name)	
(Âdc	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL.
(Bus	siness Entity Nar	me)
(Dox	cument Number)	· · ·
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 1325 HOLDINGS LLC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
LAWRENCE KARNICK (Contact Person)
1325 Holding LLC
_7608 NW 125 WAY
PARICIWN PL 33076 (City/State and Zip Code)
For further information concerning this matter, please call:
LAWRENCE VARNICK at (911) 221 5-995 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\Pi\$ \$25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building  MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327

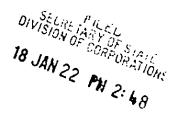
Tallahassee. Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301





#### 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)

1. The name of the	limited liability company as it appears on the records of the Florida Department
of State is: 13	25 Holdings, LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L17000	76 0 505
3. The date this mo	ember/manager withdrew/resigned or will withdraw/resign is: Jacomy 5, 2018
4.1. Shalon (Print N	hereby withdraw/resign as a same of Person Resigning)
Monagi	15 Member. (Prim Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee:	
Certified Copy:	\$30.00 (Optional)



### 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)

1. The name of the li	mited liability company as it appears on the records of the Florida Department
of State is: 132	75 Holdings, LCC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L170002	.60505
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: January 5, 2018
4.1. Ester (Print Nam	ne of Person Resigning) . hereby withdraw/resign as a
Manugir (P	rini Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
Estay	Oda
Signature of Diss	sociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)