| 180001 | 1.1.29 |
|--------|--------|
| JOUDI | 4451 |

| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| | | |
| (Add | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | ;#) |
| | | MAIL |
| | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| · | Office Use On | lv |

Г



03/12/18--01025--013 +*25.05



K. SALY SEP 1 7 2018

COVER LETTER

Registration Section TO: **Division of Corporations**

Ŀ.

HOILIZON OLEON, LLC (Name of Limited Liability Company) SUBJECT:

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

CRAIS Borrelle

(Firm/Company) 2575 S OCEON BIVE 1065 (Address) Flurida 33487 Highlowel Brach (City/State and Zip Code)

For further information concerning this matter, please call:

CRAis Baralle at (603, 305 7144 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: 🙀 \$25 Filing Fee \$55 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



FILED 18 SEP 12 AH 8: 37 SECKETANY OF STATE ALLAHASSEE, FLORIDA

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

HORIZON OCEAN, LLC _____· of State is:

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

L18000014439

3. The date this member/manager withdrew/resigned or will withdraw/resign is: <u>///ay</u> 14 2018 4. I. <u>CRAIS ECREP</u>, hereby withdraw/resign as a (Print Name of Person Resigning)

member (Print Titla)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Trais Banelle

Signature of Dissociating Member or Resigning Manager

\$25.00 (Required) Filing Fee: Certified Copy: \$30.00 (Optional)