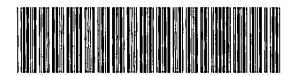
LV8 000022427

(Re	questor's Name)			
(Address)				
(Ad	dress)	<u> </u>		
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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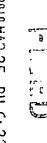


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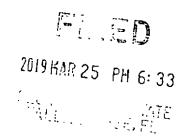
COVER LETTER

TO: Regi	stration Section		
Divis	sion of Corporations		
SUBJECT:	THE L GROUP OF SOUT	TH FLORIDA, LI	LC
	(Name of	Limited Liability Cor	npany)
The enclosed	d member, resignation or diss	ociation and fee(s	s) are submitted for filing.
Please return	all correspondence concerni	ng this matter to:	
LATASHA	HIJMPHREY-GELIN		
	(Contact Person)		_
	(Firm/Company)		_
4741 SW 3	9TH WAY		
	(Address)		_
FORT LAU	DERDALE, FL 33312		
	(City/State and Zip Code)		_
For further i	nformation concerning this m	atter, please call:	
LATASHA	HUMPHREY-GELIN	954 at (744-2422
(1)	lame of Contact Person)		& Daytime Telephone Number)
Enclosed ple \$25 Filing	ease find a check made payab g Fee	le to the Florida I □ \$55 Filing	Department of State for: g Fee & Certified Copy
	OURIER ADDRESS:		MAILING ADDRESS:
Registration Division of	Section Corporations		Registration Section Division of Corporations
Clifton Buil	•		P.O. Box 6327 Tallahassee, Florida 32314
- / fixfix	nve Cemer Circle		Tananassee, rionga 32314

Tallahassee, Florida 32301

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	limited liability company as	it appears on the records of the Florida Department LORIDA, LLC
2. The Florida doc L1800002242	_	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:
4. I. LATOYA GRANT		
(Print :	Name of Person Resigning)	
MGR		
	(Print Title)	
of this limited lia resignation in w	· · · · · · · · · · · · · · · · · · ·	e limited liability company has been notified of my
Dao.	TO Grant	
Signature of D	issociating Member or Resig	ning Manager
=	\$25.00 (Required) \$30.00 (Optional)	