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COVER LETTER

Registration Section TO: Division of Corporations

SUBJECT: JCP Holdings LLC		
(Name of Limited Liability Company)	** 1	
The enclosed member, resignation or dissociation and fee(s) are submitted for	∑ fi]jing.	器問 時代
Please return all correspondence concerning this matter to:		113
Toca remed	-	>
Contact Person)		
JCP Holdings 1.CC		
(Firm/Company)		
13624 NW 32rd PKK (Address)		
SUNN Se Fl 33333 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		

Englosed please find a check made payable to the Florida Department of State for:

STREET/COURIER ADDRESS:

(Name of Contact Person)

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

MAILING ADDRESS:

(Area Code & Daytime Telephone Number)

□ \$55 Filing Fee & Certified Copy

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

CR2E079 (2/14)

\$25 Filing Fee



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 Depart of State is: The Holdings UC. 2. The Florida document/registration number assigned to this limited liability company is:	tment ·>
	<u>.≥</u> .
• *	
2. The Floring goodiness registration statistics and an instance statistics of the state of the	\geq
<u> </u>	⊕ ∸1
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/1/19	<u>e</u>)
4. I, CAHAINE A. ZAFFA , hereby withdraw/resign as a (Prins Name of Person Resigning)	
AMBR (Print Title)	
of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	of my
- Auto-	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	

CR2E079 (2/14)

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