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(Requestor's Name)				
(Address)				
(Address)				
(v.datess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entry Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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10/05/18--01006--012 **25.00

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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Sterner World wide 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:
Mark Scott (Contact Person)
(Firm/Company)
333 NW 31 Ave
Ocala FC 3405 (City/State and Zip Code)
For further information concerning this matter, please call:
Mark Scott at (352) 289-6660 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee \$\sum \\$55 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 $_{\mathfrak{Z}}$

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as it appears	on the records of the I	Florida Department
of State is:	ternon Wellowide	LLC	
2. The Florida doc	iment/registration number assigned to the	his limited liability co	mpany is:
L18000	165615		
3. The date this me	mber/manager withdrew/resigned or wi	ll withdraw/resign is:	10/2/18
4. I. Abize	ume of Person Resigning). herei	by withdraw/resign as	a
TR	(Print Title)		
of this limited lia resignation in wr	pility company and affirm the limited listing.	ability company has b	cen notified of my
	A. Dalwalla		
Signature of Di	ssociating Member or Resigning Manag	ger	
Filing Fee:	\$25.00 (Required)		
Certified Copy:			