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COVER LETTER

TO:	_	stration Section sion of Corporations		
SUBJ		SEB 1, LLC		
		(Name of Limit	ed Liability Comp	pany)
The er	nclosed	d member, resignation or dissocia	tion and fee(s)	are submitted for filing.
Please	e returi	n all correspondence concerning the	nis matter to:	
Justin	n Zeig			
		(Contact Person)		
Zeig	Law F	Firm, PLLC		
		(Firm/Company)		
3475	Sher	idan Street, Suite 310		
		(Address)		
Holly	wood	, FL 33021		
		(City/State and Zip Code)		-
For fi	urther	information concerning this matte	er, please call:	
Justi	in Zei	3	75 4	217-3084
	(Name of Contact Person)		& Daytime Telephone Number)
	osed p 25 Filii	lease find a check made payable t ng Fee		Department of State for: 3 Fee & Certified Copy
Regi Divi Clift 2661	istratio sion o ton Bu l Exec	COURIER ADDRESS: In Section Corporations Idding utive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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)

2. The Florida document/registration number a	assigned to this limited liability company is	
L18000177851		
3. The date this member/manager withdrew/re	esigned or will withdraw/resign is:	9 (I)
N Services Group Corp	, hereby withdraw/resign as a	. 1 -
(Print Name of Person Resigning)	hereby withdraw/resign as a	ر ت
Eduardo Nilcen Da Graca, Mbr	·	
(Print Title)		
of this limited liability company and affirm resignation in writing. Signature of Dissociating Member of Res		fied of m

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: