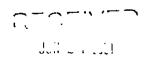
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COVER LETTER

Division of Corporations			
SUBJECT: BITMT LLC			
(Nat	me of Limited Liability C	ompany)	
The enclosed member, resignation of	r dissociation and fee	e(s) are submitted for filing.	
Please return all correspondence cor	ncerning this matter to	o:	
GUY MOSHE			
(Contact Person)			
BITMT LLC			
(Firm/Company)			
LE BROWARD BLVD STE 700			
(Address)		_	
FORT LAUDERDALE, FL 33301			
(City/State and Zip Co	ode)		
For further information concerning	this matter, please cal	I:	
GUY MOSHE	305 at (833-2221 	
(Name of Contact Person)		de & Daytime Telephone Number)	
Enclosed please find a check made p \$25 Filing Fee		Department of State for: ng Fee & Certified Copy	
= \$25 timing rec	= \$331111	ng ree ac commed copy	
Mailing Address: Registration Section		Street Address: Registration Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 819	

Tallahassee, FL 32303

CR2E079 (2/14)

TO: Registration Section



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)

	limited liability company as		
2. The Florida docu 1.18000266906	ument/registration number a	ssigned to this limited liab	oility company is:
3. The date this me	- mber/manager withdrew/res	signed or will withdraw/re	sign is:
4. 1, YANIV ADANY	ame of Person Resigning)	, hereby withdraw/re	esign as a
MGR	, , , ,		
	(Print Title)		
of this limited lial resignation in wr	bility company and affirm thiting.	he limited liability compan	y has been notified of my
Yaniv A	dany		. *
Signature of Di	ssociating Member or Resig	gning Manager	
	\$25.00 (Required) \$30.00 (Optional)		777