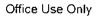
L19000004137

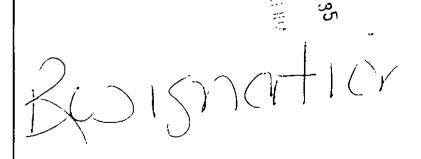
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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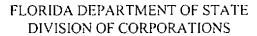
I ALBRITTON

COVER LETTER

	Registration Section Division of Corporations				
SUBJE	Making Magic Games LLC				
	(Name of Limi	(Name of Limited Liability Company)			
The end	closed member, resignation or dissocia	ition and fee	(s) are submitted for filing.		
Please	return all correspondence concerning t	his matter to	:		
Cassie	e Friedman-Caffrey				
	(Contact Person)				
Making	g Magic Games LLC				
	(Firm/Company)		_		
4120 5	56th Ave Ter East				
	(Address)		_		
Brade	nton FL 34203				
	(City/State and Zip Code)		_		
For fur	ther information concerning this matte	r, please call	:		
Cassie	e Friedman-Caffrey	941 at (879-4005		
	(Name of Contact Person)		le & Daytime Telephone Number)		
	ed please find a check made payable to Filing Fee		Department of State for: ng Fee & Certified Copy		
	ET/COURIER ADDRESS:		MAILING ADDRESS:		
_	ration Section on of Corporations		Registration Section Division of Corporations		
	Building		P.O. Box 6327		
2661 E	xecutive Center Circle assec, Florida 32301		Tallahassee, Florida 32314		

CR2E079 (2/14)







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 Department	
of State is: Maki	ng Magic Games LLC	,	
2. The Florida docu	iment/registration number as:	signed to this limited liability company is:	
L1900000413	7		
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:	
Corey A Caff	rey	hereby withdraw/resign as a	
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a	
Authorized Pe			
	(Print Title)		
of this limited lia resignation in wr		e limited liability company has been notified of my	
	Sociating Member or Resign		
Signature of Di	ssociating Member or Resign	ning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		