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## COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	The Paladin Holdings Group,	Limited Liability Co	ompany
oobsect.	(Name of	Limited Liability C	ompany)
The enclosed	d member, resignation or dis	sociation and fee	e(s) are submitted for filing.
Please return	n all correspondence concern	ning this matter to	o:
Doug Etherid	ge		
	(Contact Person)		<del></del>
The Paladin I	Holdings Group, Limited Liabilit	y Company	
	(Firm/Company)		
2756 Kinsail	Drive		
	(Address)		<del></del>
Tallahassee,	Florida 32309		
	(City/State and Zip Code)		<del></del>
For further i	nformation concerning this r	natter, please cal	l:
Doug Etherid	ge	850 at (	766 7325
()	Name of Contact Person)		de & Daytime Telephone Number)
Enclosed ple	ease find a check made payal	ble to the Florida	Department of State for:
<b>1</b> \$25 Filin			ng Fee & Certified Copy
<u>Maili</u>	ng Address:		Street Address:
Regi	stration Section		Registration Section
	sion of Corporations		Division of Corporations
=	Box 6327		The Centre of Tallahassee
t aita	ahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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## 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)

The f	limited liability company as it appears on the records of the Florida Department Paladin Holdings Group, Limited Liability Company
2. The Florida doci	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I,	, hereby withdraw/resign as a large of Person Resigning)
Member	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Deren (	E verge
Signature of Di	ssociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)