

L200000 38707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

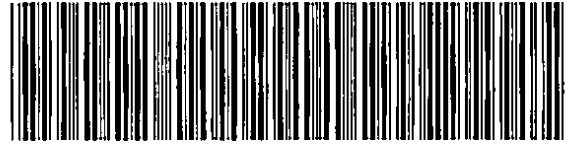
(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATE  
AFFAIRS  
TALLAHASSEE, FL 32301

2020 MAR 24 AM 8:09

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APR 08 2020  
S. YOUNG



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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FOXROCK MANAGEMENT, LLC

2. The Florida document/registration number assigned to this limited liability company is: L20000038707

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/9/2020

4. I, Grant Horwitz, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399

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