L20000189023

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO:	Regis	stration Section		
	Divis	ion of Corporations		
SUBJ	ECT:	GHEM MOTORS LLC		
		(Name of Limi	ted Liability Cor	mpany)
The e	nclosec	l member, resignation or dissocia	ition and fec(s	s) are submitted for filing.
Please	e return	all correspondence concerning t	his matter to:	
NIXO	N LEON	IARD		
		(Contact Person)	······	_
GHEM	1 МОТС	PRS LLC		
		(Firm/Company)	-	-
2791 N	NW 105t	h TERRACE		
	·	(Address)	<u></u> -	_
CORA	L SPRII	NGS, FLORIDA 33065		
		(City/State and Zip Code)		_
For fu	ırther ii	nformation concerning this matte	r, please call:	
NIXO	N LEON	ARD	954 at (298-5889
	(N	ame of Contact Person)		& Daytime Telephone Number)
Enclo	sed ple	ase find a check made payable to	the Florida I	Department of State for:
	5 Filing			g Fee & Certified Copy
	Mailii	ng Address:		Street Address:
		stration Section		Registration Section
		sion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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 it appears on the records of the Florida Department M MOTORS LLC
2. The Florida doc L20000189023	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I. Marie Leonard	, hereby withdraw/resign as a lame of Person Resigning)
MGR	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)