## LZ10000 81503

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## **COVER LETTER**

**Division of Corporations** BLACKSTONE CAPITAL INTERNATIONAL LLC **SUBJECT:** (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Andrew Nolen (Contact Person) (Firm/Company) 155 S. Hibbert St, apt 210 (Address) Mesa, AZ 85210 (City/State and Zip Code) For further information concerning this matter, please call: Andrew Nolen (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$25 Filing Fee ■ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

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)

	Elimited liability company as	it appears on the records of the E	Florida	Department
2. The Florida doc L21000081503	ument/registration number as	ssigned to this limited liability co	mpany	is:
Andrew Nolon		igned or will withdraw/resign is:, hereby withdraw/resign as		D21
	(Print Title) bility company and affirm thitting.	e limited liability company has b	ecn no	起 tified of my &
	1 Molew issociating Member or Resign	ning Manager	·	PN 2: 29
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			