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COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Wong Five LLC	
(Name o	of Limited Liability Company)
The enclosed member, resignation or di	ssociation and fee(s) are submitted for filing.
Please return all correspondence concer	rning this matter to:
Gary & Suzanne Wong	
(Contact Person)	
Wong Five LLC	
(Firm/Company)	
140 NE 27th Ave	
(Address)	
Homestead Fl 33033	
(City/State and Zip Code)	
For further information concerning this	matter, please call:
Suzanne Wilson-Wong	786 300-9369 at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made paya	able 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
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

CR2E079 (2/14)



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TATLAHASSEE, FLORIDA

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
2. The Florida doc 1.21000120819.	ument/registration number as	signed to this limited liability company is:
3. The date this me	ember/manager withdrew/resi	gned or will withdraw/resign is: June 10, 2011
4. I, Suzanne Wilson-Wong (Print Name of Person Resigning)		
(Print A		
	(Print Title)	
of this limited lia resignation in wr		e limited liability company has been notified of my
Ril	ans Junally	
Signature of D	issociating Member of Resign	ning Manager
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	