122000 205135

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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Seche (AR) TALLAHASSEE E

COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJE			
	(Name of Li	mited Liability Con	mpany)
The end	closed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning	g this matter to:	
Dan Jaco	obson		
	(Contact Person)		_
Daniel A	Jacobson, PA		
	(Firm/Company)		
901 S Fe	deral Highway, Suite 201		
	(Address)		_
Fort Laac	derdale, FL 33316		
	(City/State and Zip Code)		_
For furt	her information concerning this ma	tter, please call:	
Dan Jaco	bbson	954 at (467-3191
	(Name of Contact Person)		e & Daytime Telephone Number)
	ed please find a check made payable Filing Fee		Department of State for: g Fee & Certified Copy
	Mailing Address:		Street Address:
	Registration Section Division of Corporations		Registration Section 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)



FILED

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SECRE MARY SEEL FL

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)

	e limited liability company as it appears on the records of the Florida Department JMC 4 LLC				
2. The Florida doo	The Florida document/registration number assigned to this limited liability company is: L22000205135				
	ember/manager withdrew/resigned or will withdraw/resign is: 8222 appell, hereby withdraw/resign as a Name of Person Resigning)				
aumorized memi	(Print Title)				
of this limited li resignation in w	ability company and affirm the limited liability company has been notified of my riting.				
Signature of L	Dissociating Member or Resigning Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				