L23000316139

(Requestor's Name)	
	(Address)	
(Add ess)	
(Address)		
	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
		
(Business Entity Name)	
,	Document Number)	
,	Document (value)	
Certified Copies	Certificates of Status	
Special Instructions to I	Filing Officer:	
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	10000 4 1	





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SINKETARY OF STATE
TALL AHASSEE. FLORIDA

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CORPORATE

When you need ACCESS to the world

ACCESS, _INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

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•	P	PICK UP: MISTY 7/17		
XX	CERTIFIED COPY PHOTOCOPY CUS	<u> </u>		
XX		FOREIGN DISSOCIATION		
1.	KINGS DUCK BAR (CORPORATE NAME AND D			
2.	(CORPORATE NAME AND D	OCUMENT #)		
3.	(CORPORATE NAME AND D	OCUMENT #)		
4.	(CORPORATE NAME AND D	OCUMENT #)		
5.	(CORPORATE NAME AND D	OCUMENT #)		
6.	(CORPORATE NAME AND D	OCUMENT #)		
SPECIA INSTRU	AL JCTIONS:			



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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 docu L23000316139	ment/registration number as	signed to this limited liability company is:
		igned or will withdraw/resign is:
4. 1, (Print N authorized member		, hereby withdraw/resign as a
		ne limited liability company has been notified of my
Signature of Di	ssociating Member or Resig	ning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	

CR2E079 (2/14)