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## **COVER LETTER**

TO: Registration Section
Division of Corporations

CR2E079 (2/14)

SUBJECT: Wainwright Cattle F	Ranch, L.C.	
	ame of Limited Liability Com	pany)
The enclosed member, resignation	or dissociation and fee(s)	are submitted for filing.
Please return all correspondence co	pncerning this matter to:	
Frances Casey Lowe		
(Contact Person)	)	
Guilday, Simpson, West, Hatch	Lowe & Roane, P.A.	
(Firm/Company)	; ; !	
68-A Feli Way	1	
(Address)		
Crawfordville, FL 32327		
(City/State and Zip (	Gode)	
For further information concerning	this matter, please call:	
Michelle Maloni	850 at (	926-8245
(Name of Contact Person)	<del></del>	& Daytime Telephone Number)
Enclosed please find a check made	payable to the Florida De	epartment of State for:
□ \$25 Filing Fee	■ \$55 Filing	Fee & Certified Copy
STREET/COURIER ADDRESS	 	MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle	1	Tallahassee, Florida 32314
Tallahassee, Florida 32301	T	



## 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 a	s it appears on the records of the f	Florida Department
	 	ssigned to this limited liability co	mpany is:
3. The date this me	mber/manager withdrew/re	signed or will withdraw/resign is:	10/13/2017
4. I. Carol B. Wai	nwright	, hereby withdraw/resign as	a
Member	(Print Title)		
	 	he limited liability company has b	een notified of my
Carel B.	Wainwright ssociating Member or Resig	aning Manager	
Signature of D	ssociating recipier of Resignation	guing manager	
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		