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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JZE BOCA, LLC (Name of Limited L	ishility Company)
(Name of Elimited L	Бавину Сопрану)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
MARC D. WIGDER, ESQ.	
(Contact Person)	
MARC D. WIGDER, PA	
(Firm/Company)	
5301 N. FEDERAL HWY, SUITE 220	
(Address)	
BOCA RATON, FL 33487	
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
MARC WIGDER	561 674-0001
	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



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)

1. The name of the of State is:		it appears on the records of the Flor	ida Departme	nt
2. The Florida docu M12000002 6		signed to this limited liability compa	any is:	
3. The date this me	mber/manager withdrew/resi	gned or will withdraw/resign is:	15/2014	_
4. I, MARC D. WIGDER, P.A. , hereby withdra (Print Name of Person Resigning)		, hereby withdraw/resign as a		
(Print N	ame of Person Resigning)			
MANAGER				
-	(Print Title)			
of this limited lial resignation in wr		e limited liability company has been	notified of m	. y
	L-			
Signature of Di	ssociating Member or Resign	ning Manager	14 MAR 3 SECHLIMA TALLAHASS	
Filing Fee:	\$25.00 (Required)			, 12
_	\$30.00 (Optional)		် ႏွို	E TOTE
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