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(Re	questor's Name)	
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Resignation

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COVER LETTER

Division of Corporations MERKUR GAMING US, LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Brian R. Kopelowitz (Contact Person) Kopelowitz Ostrow (Firm/Company) One West Las Olas Blvd., Suite 500 (Address) Fort Lauderdale, FL 33301 (City/State and Zip Code) For further information concerning this matter, please call: Brian R. Kopelowitz (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy **■** \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations** Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

TO:

Registration Section







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 CUR GAMING US, LLC
2. The Florida docu M1400000077	ment/registration number assigned to this limited liability company is:
	mber/manager withdrew/resigned or will withdraw/resign is: $\frac{1}{2}$ (1) year of Person Resigning). hereby withdraw/resign as a
Manager	Print Title)
	bility company and affirm the limited liability company has been notified of my
Signature of Di	ssociating Member or Resigning Manager
•	\$25.00 (Required) \$30.00 (Optional)