

H14000095776

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Diane Cushing - this is a re-submission
Division of Corporations
Fax Number : (850) 617-6383

From: CARRIE RAMOS, PARALEGAL, PLEASE FAX CONFIRMATION TO 407 244-5690
Account Name : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407) 843-6880
Fax Number : (407) 244-5690

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HIGH RIDES, LLC

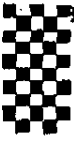
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Apr. 24, 2014 2:56PM

Gray Robinson:00:14 PM PAGE 1/001 Fa No. 1759-er P. 2



April 23, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

~~HIGH RIDES, LLC~~
5782 W IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34746

SUBJECT: HIGH RIDES, LLC
REF: M14000000122

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

FAX Aud. #: B14000095776
Letter Number: 914A00008735

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SEAL OF THE
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



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)

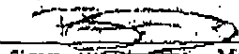
1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: High Rides, LLC

2. The Florida document/registration number assigned to this limited liability company is:
M1400000122

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4-17-14

4. I, Brian Mirfin, hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my
resignation in writing.


Signature of Resigning Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

CR1807 (2/14)