117000019665

(Requestor's	Name)			
(Address)				
(Address)				
City/State/Zip/Phone #)				
PICK-UP W	AIT MAIL			
(Business En	tity Name)			
(Document Number)				
Certified Copies Cer	tificates of Status			
Special Instructions to Filing Officer:				
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2017 MAR 30 PM 12: 46
SHOWLASSEE, FLORIDA

K. SALY APR - 3 2017

COVER LETTER

TO:	_	stration Section ion of Corporations		
SUBJI	ECT:	First Class Appliance Delive		
		(Name of Lim	ited Liability Con	npany)
The en	closed	I member, resignation or dissoci	ation and fee(s) are submitted for filing.
Please	return	all correspondence concerning	this matter to:	
Jamie	Sang	gster		
		(Contact Person)		_
First (Class	Appliance Delivery LLC		
		(Firm/Company)		_
5756	Corpo	oration Circle		_
		(Address)		
Ft My	ers, F	1 33905		·
•		(City/State and Zip Code)		-
For fur	rther in	nformation concerning this matt	er, please call:	
Bever	rly On	son	239	281-0285
	(N	ame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclos	-	ease find a check made payable t g Fee		Department of State for: g Fee & Certified Copy
Registr Division Clifton 2661 E	ration on of C n Build Execut	OURIER ADDRESS: Section Corporations ding ive Center Circle Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 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)

	limited liability company as it at Class Appliance Delivery LL	ppears on the records of the Florida Department
2. The Florida docu L1700001966		ned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigne	od or will withdraw/resign is: 3/29/2017
4. I, Beverly Onson (Print Name of Person Resigning)		
MGR		
	(Print Title)	
of this limited lia resignation in wr		nited liability company has been notified of my
Signature of Di	ssociating Member or Resigning	, Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	