

205 0000 16729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

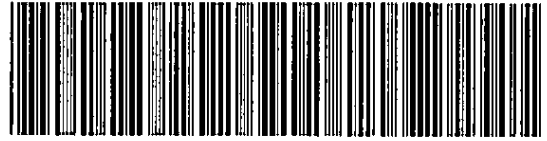
(Document Number)

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J. HORNE
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10/20/21 --01021--005 **25.00

2021 OCT 20 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FL 32399

FILED



FILED
2021 OCT, 20 AM 10: 29
SECRETARY OF STATE
TALLAHASSEE, FL

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: LAKESIDE GARDENS MOBILE HOME PARK, LLC

2. The Florida document/registration number assigned to this limited liability company is:
105000016729

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/14/21

4. I, ROBERT J. KERNON, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM
(Print Title)

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

X
Signature of Dissociating Member or Resigning Manager

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