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SECRETARY OF STATE

JUL 15 2021 A RAMSEY

#### COVER LETTER

Division of Corporations	
SUBJECT: Glougestershi	ire; LLC
	Limited Liability Company)
The enclosed member, resignation or dis	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
Emily J. Phillips	
(Contact Person)	
Phillips Lorder, PLC 2 South Bisecupic Bluck #2	300
(Firm/Company)	
(Address)	
1112 - 1 - Florida 22121	
Miomi, Florida 33131 (City/State and Zip Code)	
For further information concerning this r	natter, please call:
Emily J. Phillips	at ( 305 ) 350-5299
(Name of Contact Person)	(Arya Code & Daytime Telephone Number)
Enclosed please find a check made payal ☐ \$25 Filing Fee	ble to the Florida Department of State for:  \$\infty\$\$ \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tailahassee, FL 32303

CR2E079 (2/14)

TO: Registration Section



#### FILED

2027 JUN 11 PM 12 15

SECRETARY OF STATE

### 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 li	mited liability company as it appears on the records of the Florida Department
of State is:G	loucestershire, LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L15000089	624
4. I. Regir	ber/manager withdrew/resigned or will withdraw/resign is:
	rint Title)
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
Pequa Pro Signature of Diss	sociating Member or Resigning Manager
Filing Fee: Certified Copy:	