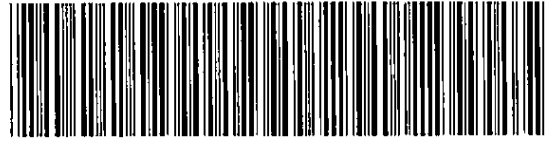


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2023 NOV 27 AM 7:40  
L 1  
L 2

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

*g* 12/11/2023

**COVER LETTER**

**\*TO:** Registration Section  
Division of Corporations

**SUBJECT:** Graylani Business Services LLC  
(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:

Courtney Mason  
(Contact Person)

Graylani Business Services LLC  
(Firm/Company)

P.O. Box 246  
(Address)

Seffner, FL 33583  
(City/State and Zip Code)

For further information concerning this matter, please call:

Courtney Mason at ( 813 ) 900 6999  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



2023 NOV 27 AM 7:40

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: Graylani Business Services LLC

2. The Florida document/registration number assigned to this limited liability company is: L22000437174

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/17/2023

4. I, Anthony L Mason, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

CEO  
*(Print Title)*

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

Anthony L Mason  
Signature of Dissociating Member or Resigning Manager

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