

L21000317400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

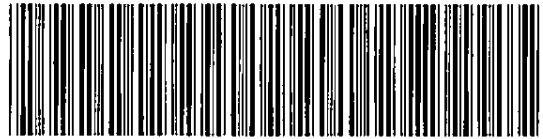
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1030 CHALET SUZANNE RD 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:

DAVID U. ARANGO

(Contact Person)

(Firm/Company)

8155 JAMESTOWN DR

(Address)

WINTER HAVEN, FL 33884

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID U. ARANGO

(Name of Contact Person)

at (813) 244-9826

(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

WEAVER ♦ LOVELESS LAW

November 8, 2023

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

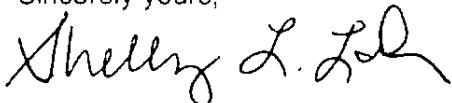
Re: 1030 CHALET SUZANNE RD LLC / Document No. L21000317400

Dear Sir or Madam:

Enclosed please find the Dissociation or Resignation of Member, Manager from Florida or Foreign Limited Liability Company for 1030 Chalet Suzanne Rd, LLC. Also enclosed please find Weaver Loveless Law Trust Account Check # 6299 in the amount of **\$25.00** for the required filing fees.

If you should have any questions, or need anything further to process this document, please do not hesitate to call.

Sincerely yours,



Shelby L. Loveless, Esq.
slopeless@welovelaw.com

/ms

Enclosures

cc: Ms. Allison N. Ciszek, via email only



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: 1030 CHALET SUZANNE RD LLC

2. The Florida document/registration number assigned to this limited liability company is:
1.21000317400

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/18/2023

4. I, ALLISON N. CISZEK, 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 Dissociating Member or Resigning Manager

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