

L03000048202

Division of Corporations

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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DAVIS, SCHNITKER, REEVES & BROWNING, P.A.
Account Number : I19980000057
Phone : (850) 973-4186
Fax Number : (850) 973-8564

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FULL CIRCLE DAIRY, LLC

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FULL CIRCLE DAIRY, 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:

GERALD R. GARLAND
(Contact Person)

FULL CIRCLE DAIRY, LLC
(Firm/Company)

1479 SE WINQUEPIN ST.
(Address)

LEE, FLORIDA 32059
(City/State and Zip Code)

For further information concerning this matter, please call:

GERALD R. GARLAND at (_____) _____
(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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CR22079 (2/14)

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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: FULL CIRCLE DAIRY, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L03000048202

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

4. I, LEE MILK CO., LLC, hereby withdraw/resign as a
(Print Name of Person Resigning)

MEMBER

(Print Title)

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

A handwritten signature in dark ink, appearing to read "Gerald Garland", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

GERALD GARLAND, as Manager of Lee Milk Co., LLC

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)

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TALLAHASSEE, FLORIDA

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