

LO5000014188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

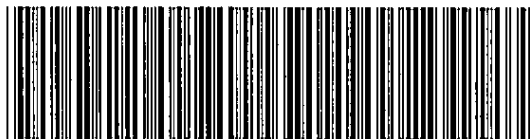
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900327617299

04/11/19--01008--010 **35.00

FILED
2019 APR 23 PM 12:20

Resignation

APR 30 2019

I ALBRITTON

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JMAJ, LLC.

(Name of Corporation)

DOCUMENT NUMBER: L05000014188

Please return all correspondence concerning this matter to the following:

John Farrell

(Name of Person)

Dacasso Limited, Inc.

(Name of Firm/Company)

2350B NW 71st Place

(Address)

Gainesville, FL 32653

(City/State and Zip Code)

For further information concerning this matter, please call:

John Farrell

(Name of Person)

at (352) 331-4710

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2019

JOHN FARRELL
DACASSO LIMITED INC
2350B NW 71ST PLACE
GAINESVILLE, FL 32653

SUBJECT: JMAJ, LLC.
Ref. Number: L05000014188

We have received your document for JMAJ, LLC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 119A00007790

RECEIVED
2019 APR 29 PM 3:35
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: Florida

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

L05000014188

3. The date this member/manager withdrew/resigned or will withdraw/resign is: MARCH 27, 2019

4. I, Nelinda Farrell, 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)

FILED
2019 MAR 29 PM 12:20