Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000440789 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : J.KEVIN DRAKE, P.A. Account Number : I20020000002

Phone : (941)954-7750 Fax Number : (941)951-1509

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TUCKERS GRADE ASSOCIATES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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DEC 03 2021

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Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	ECT:TUCKERS GRA	ADE ASSOCIATES, I	LLC		
	(Name of	Limited Liability Cor	mpany)		
The e	nclosed member, resignation or dis	sociation and fee(s	s) are submitted for filing.		
Please	e return all correspondence concern	ing this matter to:			
	J. KEVIN DRAKE, ESQ.				
-	(Contact Person)		_		
	J. KEVIN DRAKE, P.A.			2	<u></u>
	(Firm/Company)		_	2021 DEC	SECO 1351AIF
	1432 FIRST STREET			EC -2	
	(Address)		_		DE CORFORATION
	SARASOTA, FLORIDA 3423	6		AM 10: 1	SE
	(City/State and Zip Code)		_	7	
For fu	orther information concerning this r	natter, please call:			
J. KEV	'IN DRAKE, ESQ.	941 at (954-7750		
•	(Name of Contact Person)		& Daytime Telephone Number)		
	sed please find a check made payal 5 Filing Fee		Department of State for: g 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 81	10	

CR2E079 (2/14)

Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

M DEC -2 MID: 17

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: TUC	KERS GRADE ASSOCIATES, LLC
2. The Florida doc L06000016750	ument/registration number assigned to this limited liability company is:
KIMBEDIVE	ember/manager withdrew/resigned or will withdraw/resign is: 11-19-2021 DRIGGERS hereby withdraw/resign as a
	Name of Person Resigning), hereby withdraw/resign as a
MANAGER	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)

CR2E079 (2/14)