

**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 : COBB & COLE Account Number : 120030000050 : (386)323-9251 Phone , Fax Number : (386)258-5068 \*\*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 PALM COAST SEMINOLE GROUP, LLC 31.07 Certificate of Status Û 0 ් Certified Copy 01 Page Count ഗ \$25.00 Estimated Charge Þ P ORID AUG 15 ã Z 20164 Corporate Filing Menu S Warren Help **Electronic Filing Menu** 

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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 Palm Coast Seminole Group, LLC. of State is:
- 2. The Florida document/registration number assigned to this limited liability company is: L06000025420

8-10-16 3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_ Gus Simos (Print Name of Person Resigning), hereby withdraw/resign as a

4. I, \_\_\_\_\_

Co-Manager and Member

(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: Certified Copy:

\$25.00 (Required) \$30.00 (Optional)



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