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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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22 OCT 14 AM 5:09

4:30 PM OCT 14 2022

COVER LETTER

TO: Registration Section
Division of Corporations

PALM COAST SEMINOLE GROUP, LLC

SUBJECT:

(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:

LOUIS S. WEITMAN

(Contact Person)

(Firm/Company)

52439 HAWTHORN CT

(Address)

LA QUINTA, CA 92253

(City/State and Zip Code)

For further information concerning this matter, please call:

LOUIS S. WEITMAN

561

715-8836

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~~

~~WEITMAN FILING FEE FOR GOV. MED. COM.~~

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

22 OCT 14 AM 5:09

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS



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:
106000025420

NOVEMBER 1, 2022

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

4. I, _____, hereby withdraw/resign as a

(Print Name of Person Resigning)

MEMBER AND 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)

22 OCT 14 AM 5:09

FILED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA