

17-Oct-2024 15:36 To: +18506176383

From: +18135412006

p.1

Fax Number : (850)617-6383

Florida Department of State
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.

((H24000347458 3)))



H240003474583ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From:
Account Name : BRICK BUSINESS LAW, P.A.
Account Number : I20230000178
Phone : (813)816-1816
Fax Number : (813)692-1982

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

Email Address: danielle.peynado@brickbusinesslaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JOANN SMITH LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Helpt. LEMMEUX

OCT 18 2024

Fax Number : (850)617-6383

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JOANN SMITH 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:

JOANN SMITH

(Contact Person)

JOANN SMITH LLC

(Firm/Company)

824 HAYNES RD

(Address)

LAKELAND, FL 33809

(City/State and Zip Code)

For further information concerning this matter, please call:

JOANN SMITH

863 858-1316
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

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

Fax Number : (850)617-6383



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: JOANN SMITH LLC

2. The Florida document/registration number assigned to this limited liability company is:
L07000004217

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/17/24

4. I, JILL M. JONES, 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.

Jill M Jones
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
2024 OCT 17 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FL