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Office Use Only



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COVER LETTER

TO: Registration Section **Division of Corporations** Amelia Island Landscapes 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: David Christian (Contact Person) Amelia Island Landscapes LLC (Firm/Company) 107 Citrona Dr. (Address) Fernandina Beach, Fl. 32034 (City/State and Zip Code) For further information concerning this matter, please call: 237-0615 David Christian at ((Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee

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



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)

2. The Florida docu 1.10000004568	ment/registration number assigned to this limited liability company is:	20 00	
3. The date this mer	mber/manager withdrew/resigned or will withdraw/resign is: 07-01-2020	<u></u>	ے مرتبہ اگران -
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of this limited liab	sility company and affirm the limited liability company has been notified	d of m	ij
resignation in wri	ting.		
resignation in wri	ssociating Member or Resigning Manager		