

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Registration Section **Division of Corporations** Commendable Home Inspection, 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: Terrence G Dennison (Contact Person) Commendable Home Inspection, LLC (Firm/Company) 2494 Indian Trail East (Address) Palm Harbor, FL 34683 (City/State and Zip Code) For further information concerning this matter, please call: Terrence Dennison (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



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SLOKE FALO DE STATE
FALLAHASSEE, FLORIDA

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)

of State is:	limited liability company as it appears on the records of the Florida D MMENDABLE HOME INSPECTION LLC	
	ament/registration number assigned to this limited liability company is	s:
L1000008497	8 ·	i
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:	14
Lisa A Dennison 4. I. hereby withdraw/resign as a		ı
	/son, hereby withdraw/resign as a /same of Person Resigning)	1
Vice Presider	nt (MGRM) MNAGING MEMBER	ì
	(Print Title)	1
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notifiting.	fied of my
Lim	senson.	1
Signature of Di	issociating Member or Resigning Manager	İ
Filing Fee:	\$25.00 (Required)	1
Certified Copy:	\$30.00 (Optional)	1