

L11 0000 18357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

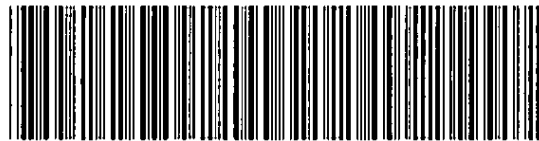
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900420657239

12/27/23--01043--001 **25.00

2023 DEC 27 AM 10:46

FILED

al

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Asset Receivership Group 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:

Robert Melsom

(Contact Person)

Asset Receivership Group LLC

(Firm/Company)

1100 16th Street North,

(Address)

St. Petersburg, FL 33704

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert Melsom

727

504 - 6789

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

2023 DEC 27 AM 10:46

FILED



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: Asset Receivership Group LLC

2. The Florida document/registration number assigned to this limited liability company is: L11000018357

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/07/2023

4. I, Jeffery Boyle for TBARG LLC, 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.

[Signature] 12/19/23
Signature of Dissociating Member or Resigning Manager

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