

(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
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(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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		PICK UP:	JENA 10/14				
		CERTIFIED COPY					
	XX	РНОТОСОРУ					
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	XX	FILING	DISSOCIATION				
1.		JD WINE CONCEPTS, LLC (CORPORATE NAME AND DOCUMENT #)					
2.		(CORPORATE NAME AND DOCUMEN	(T #)				
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<i>5</i> .	(CORPORATE NAME AND DOCUMENT #)						
6.		(CORPORATE NAME AND DOCUMEN	Ϋ́Γ #)				
		(CORPORATE NAME AND DOCUMEN	V1 #)				
SPE	CIAI	L INSTRUCTIONS:					

COVER LETTER

Registration Section Division of Corporations JD WINE CONCEPTS, 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: Dudley Q. Sharp, Jr. (Contact Person) South Milhausen PA (Firm/Company) 1000 Legion Place Suite 1200 (Address) Orlando (City/State and Zip Code) For further information concerning this matter, please call: **Dudley Sharp** 407 (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 Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:



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 document/registration number assigned to this limited liability company is: L11000064133 3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 30, 2024 4. I, Jill Ramsier (Print Name of Person Resigning) Member and Managing Member (Print Title) of this limited liability company and affirm the limited liability company has been notified oresignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	of State is:	/INE CONCEPTS, LLC			
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4. I, Jill Ramsier (Print Name of Person Resigning) Member and Managing Member (Print Title) of this limited liability company and affirm the limited liability company has been notified o resignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)	2. The Florida doc	ument/registration number as	ssigned to this limited liability co	mpany is:	
4. I, Jill Ramsier (Print Name of Person Resigning) Member and Managing Member (Print Title) of this limited liability company and affirm the limited liability company has been notified o resignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)	L11000064133				
4. I. Jill Ramsier, hereby withdraw/resign as a	3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	April 30, 2024	
Member and Managing Member (Print Title) of this limited liability company and affirm the limited liability company has been notified o resignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)	Jill Ramsier				
of this limited liability company and affirm the limited liability company has been notified o resignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)	(Print A	Jame of Person Resigning)	, nereby withdrawitesign as	u	
of this limited liability company and affirm the limited liability company has been notified o resignation in writing. Signature of Dissociating Member or Resigning Manager Filing Fee: \$25.00 (Required)	Member and Mar	naging Member			
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=	Signature of D	issociating Member or Resig	ning Manager	202	
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