## L12000047367

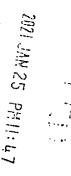
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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MAR () 6 2021 S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations	
Recromax, LLC SUBJECT:	
(Name of Limited Liability	Company)
The enclosed member, resignation or dissociation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
Kenneth Padgett	
(Contact Person)	
Recromax, LLC	
(Firm/Company)	
105 Commerce St. Suite 125	
(Address)	<del></del>
Lake Mary, FL 32746	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please ca	all:
Kenneth Padgett 321	303-5376
	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Floric	da Department of State for:
■ \$25 Filing Fee □ \$55 Fi	iling Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	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)

	• •	as it appears on the records of	the Florida Department
of State is:	omax, LLC		,
2. The Florida doc L12000047367	ument/registration number a	assigned to this limited liabilit	y company is:
3. The date this me	ember/manager withdrew/re	esigned or will withdraw/resign	n is:
4. I, Kenneth W Padgett, hereby withdraw/resign as a, hereby withdraw/resign as a		n as a	
(Print )	Name of Person Resigning)		
MGRM			
	(Print Title)		
of this limited lia resignation in wr		the limited liability company h	nas been notified of my
fluid	H. W. Parkett		202!
Signature of D	issociating Member or Resig	gning Manager	2021 JAN 25
Filing Fee:	\$25.00 (Required)		? <u>?</u>
Certified Copy:	\$30.00 (Optional)		PH !!: