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(Address)		
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(Cil	iy/Glate/Zip/P11011	u m)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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2019 MAY 28 PM 12: 32
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Long & Associates Realty of Tampa LLC

(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

John Bentley
(Contact Person)
Long & Associates
(Firm/Company)
21750 State Road 54
(Address)
Lutz, FL 33549

For further information concerning this matter, please call:

(City/State and Zip Code)

John Bentley

(Name of Contact Person)

at (813) 949-3033

(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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)

FILED 12813 May 28 PM 12: 32



SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as ing & Associates Realty	t appears on the records of the Florida Department of Tampa LLC
2. This limited liab	vility company was organized	under the laws of:
3. The Florida doc L12000089	•	this limited liability company is:
4. I, Amy Smith (Print Name of Person Resigning)		, hereby resign as a Managing Member (Print Title)
of this limited lia resignation in wr	bility company and affirm the	limited liability company has been notified of my
Qu	us Snuth	
Signature of Res	igning Member, Managing Me	ember or Manager
Filing Fee: Certified Conv	\$25.00 (Required) \$30.00 (Optional)	

CR2E079 (5/06)