

L13 0000 20043

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

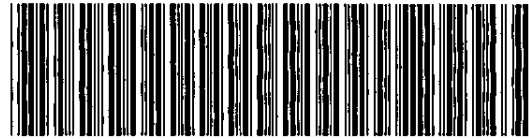
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800255550228

01/21/14--01010--010 **25.00

RECEIVED
FEB 1 2014
FILING OFFICE
TALLAHASSEE, FLORIDA

12 JAN 21 PM 10:51

J. S. Smith JAN 23 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **JMG Management Solution 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:

Mathew Stec

(Contact Person)

JMG Management Solution LLC

(Firm/Company)

4475 US HWY 1 SOUTH SUITE # 206

(Address)

SAINT AUGUSTINE, FL 32084

(City/State and Zip Code)

For further information concerning this matter, please call:

MATHEW STEC/ROBERT B GUEST at **954** **336-2126/(904)894-9302**

(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

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: JMG MANAGEMENT SOLUTION LLC

2. The Florida document/registration number of this limited liability company is:
L13000020043

3. The date this member withdrew or will withdraw is: 12/15/13

4. I, RYAN PHILLIPS, hereby resign as a MANAGER
(Print Name of Person Resigning) *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Resigning or Dissociating Manager, Member

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

12/17/21 PM 10:51
RECEIVED
FLORIDA
DIVISION OF CORPORATIONS