

L13000056170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

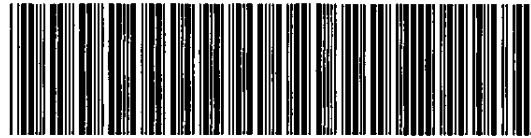
(Business Entity Name)

(Document Number)

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03/26/14--01023--009 \*\*55.00

FILED  
2014 MAR 26 11:59  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

APR 01 2014  
D. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MAGICAL HOME RENTALS 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:

LUCY CLARK  
(Contact Person)

MAGICAL HOME RENTALS  
(Firm/Company)

1241 ROYCROFT AVE,  
(Address)

CELEBRATION, FL, 34747  
(City/State and Zip Code)

For further information concerning this matter, please call:

LUCY CLARK at (407) 566-4633  
(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

FILED  
2014 MAR 26 11:59  
TALLAHASSEE FLORIDA  
CLERK OF STATE



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: MAGICAL HOME RENTALS LLC

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

L13000056170

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/13/14

4. I, JILL SACHS, hereby withdraw/resign as a  
(Print Name of Person Resigning)

VICE-OPERATING MANAGER  
(Print Title)

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

Jill Sachs  
Signature of Dissociating Member or Resigning Manager

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

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TALLAHASSEE, FLORIDA