

L13000084569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

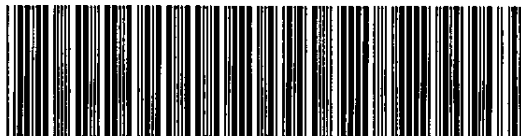
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

RECEIVED  
11 NOV - 7 PM 4:11  
11-10-14  
OFFICE OF THE SECRETARY OF STATE  
DIVISION OF CORPORATIONS

Office Use Only



300266238573

11/07/14--01032--003 \*\*25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 NOV - 7 PM 12:32

C. Lewis  
11-10-14

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: IMA Pros 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:

JUSTIN G CERRATO  
(Contact Person)

HATHAWAY & REYNOLDS, PA  
(Firm/Company)

50 A1A N. Ste. 108  
(Address)

Ponte Vedra Beach FL 32082  
(City/State and Zip Code)

For further information concerning this matter, please call:

JUSTIN G CERRATO at (904) 373-3174  
(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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

14 NOV -7 PM 12:32

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: JMA Pros, LLC

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

L13000084569

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/5/2014

4. I, JEREMY L. MILLER, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGRM  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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