

LI5000 107 625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

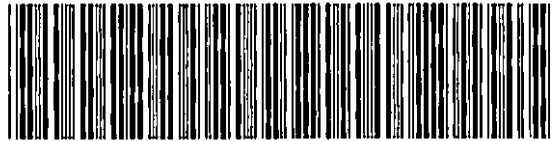
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600331577556

07/15/19--01024--010 **475.00

FILED
2015 JUL 15 AM 11:19
TAL.

Y SULKER

JUL 23 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 111 LASSO DRIVE LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fees are submitted for filing.

Please return all correspondence concerning this matter to:

KATE MESIC, ESQUIRE

(Contact Person)

LAW OFFICES OF KATE MESIC, PA

(Firm Name)

6550 ST. AUGUSTINE ROAD, SUITE 305

(Address)

JACKSONVILLE, FL 32217

(City, State and Zip Code)

For further information concerning this matter, please call:

KATE MESIC

(Name of Contact Person)

904

619-2510

(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 32311



DEPARTMENT OF BANKING AND FINANCE
FLORIDA DEPARTMENT OF BANKING AND FINANCE

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**
(Pursuant to any of the Florida statutes.)

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: 111 LASSO DR LLC

2. The Florida document registration number assigned to this limited liability company is:
L15000107625

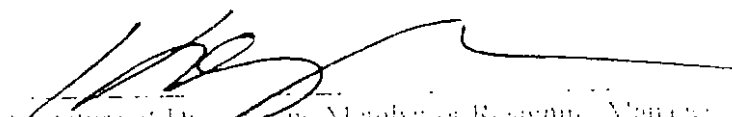
3. The date this member/manager withdrew, resigned, or was withdrawn, resigned, is: 6/26/19

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

MANAGER/MEMBER

(Print Title)

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


Signature of Dissociating Member or Resigning Member

filing fee \$25.00 (Required)
 certified copy \$50.00 (if needed)

6/26/19
2019 JUL 15 AM 11:19
JUL 15 2019