

415000109931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

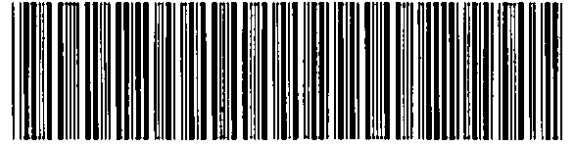
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ENCLOSURE
AUG 14 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Active Agent Referrals, 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:

John P Maisel III
(Contact Person)

Active Agent Referrals, LLC
(Firm/Company)

654 SE Fort Island Trail
(Address)

Crystal River, FL 34429
(City/State and Zip Code)

For further information concerning this matter, please call:

John P Maisel III at (352) 302-5351
(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

**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: Active Agent Referrals, LLC

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

L15000109931

3. The date this member/manager withdrew/resigned or will withdraw/resign is: June 5, 2018

4. 1. Christopher A Ensing, hereby withdraw/resign as a

(Print Name of Person Resigning)

Manager

(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 Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)

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: Active Agent Referrals, LLC.
2. The Florida document/registration number assigned to this limited liability company is: L15000109931.
3. The date this member/manager withdrew/resigned or will withdraw/resign is: June 5, 2018
4. I, CHRISTOPHER A. ENSING, 3625 N Suwanee Pt., Crystal River, FL 34428, hereby withdraw/resign as a managing member/member, of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Kristina Kydd
Witness

Kristina Kydd
(printed/typed name of witness)

S. Goncalves
Witness

Sharon Goncalves
(printed/typed name of witness)

Christopher A. Ensing
CHRISTOPHER A. ENSING

FILED
AUG - 8 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
COUNTY OF CITRUS

The foregoing instrument was acknowledged before me this 7 day of June, 2018, by CHRISTOPHER A. ENSING who has produced a Florida driver's license as identification.

S. Goncalves
Notary Public

