415 000 113 296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
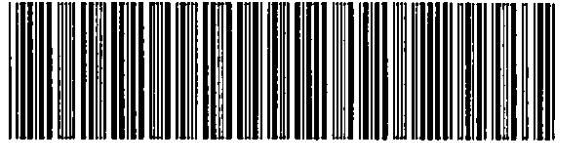
(Business Entity Name)

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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COVER LETTER

TO: Registration Section
Division of Corporations

NORTH DAKOTA PARTNERS, LLC.
SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Denial and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marlene Hart
_____
Name of Person

SSM LAW GROUP
_____
Firm/Company

1420 Gene St.
_____
Address

Winter Park, FL. 32789
_____
City/State and Zip Code

INFO@SSMLAWGROUP.COM
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MIKE SIGNH   407   900-9055
_____ at (_____) _____
Name of Person   Area Code   Daytime Telephone Number

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                        Tallahassee, FL 32303

CR2E139 (2/14)

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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: NORTH DAKOTA PARTNERS, LLC.
   _____.

2. The Florida document/registration number assigned to this limited liability company is:
   L15000113296
   _____.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/14/2022 _____

4. I, MARLENE HART
   _____, hereby withdraw/resign as a
   (Print Name of Person Resigning)

   Title MGR
   _____.
           (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)

2022 JUL 15 PM 4: 12

CR2E079 (2/14)