16 000091385

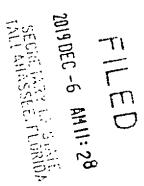
(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100337515781

12/06/19--01019--018 **55.00



Resignation

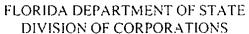
JAN 1 3 2020 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: STRATA REALTY G	Liability Company)
The enclosed member, resignation or dissociation	
Please return all correspondence concerning this	s matter to:
LJ REALTY (Firm/Company)	
30844 MISSION AVE (Address)	
TAVARES FL 32778 (City/State and Zip Code)	
For further information concerning this matter, p	please call:
TIM REYNOLDS at (Name of Contact Person)	(352) 459-6173 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th ☐ \$25 Filing Fee	ne Florida Department of State for: I \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)







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 Departm	ent
of State is:	TRATA REALTY GROUP LLC	_·
2. The Florida doci	iment/registration number assigned to this limited liability company is:	
L1600	00973865	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 10-15-20	<u>19</u>
4. I, JAMES (Print N	KIRK REYNOLDS . hereby withdraw/resign as a fame of Person Resigning)	
	MANAGER (Print Title)	
	(Print Title)	
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of a iting.	ny
James	ssociating Member or Resigning Manager	
Signature of Di	ssociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	