

L16 000 224 973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

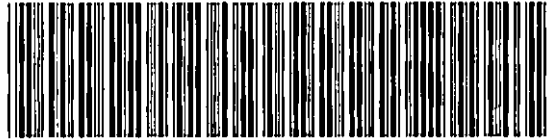
(Business Entity Name)

(Document Number)

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

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2022 MAR 21 AM 6:50  
SECRETARY OF STATE  
TALLAHASSEE, FL

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APR 06 2022

**TO:** Registration Section  
Division of Corporations

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

For further information concerning this matter, please call:

Enclosed please find a check made payable to the Florida Department of State for:

**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

FILED



2022 MAR 21 AM 6:50

SECRETARY OF STATE  
TALLAHASSEE, FL

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: GGG INNOVATIVE SERVICES LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L16000224973

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/18/22

4. I, Sherry Louise Hoskinson, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

AMBR

*(Print Title)*

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

Sherry L. Hoskinson  
Signature of Dissociating Member or Resigning Manager

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