## L17000033211

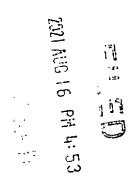
| (Re                                     | equestor's Name)   |           |
|---|--------------------|-----------|
| (Ad                                     | dress)             |           |
| (Ad                                     | dress)             |           |
| (Cit                                    | ty/State/Zip/Phone | e #)      |
| 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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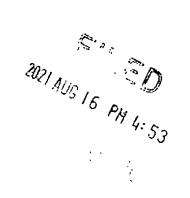
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## **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |
|--|--|
| SRS-Daytona LLC SUBJECT:   |  |
| (Name of Lir   | mited Liability Company)   |
| The enclosed member, resignation or dissoc   | ciation and fee(s) are submitted for filing.   |
| Please return all correspondence concerning  | g this matter to:  |
| Jason Holley   |  |
| (Contact Person)   |  |
| (Firm/Company)   | · · · · · · · · · · · · · · · · · · ·  |
| 1585 Mobile Av   |  |
| (Address)  |  |
| Holly Hill Florida 32117   |  |
| (City/State and Zip Code)  |  |
| For further information concerning this mat  | tter, please call:   |
| Jason Holley   | 386 682-0465<br>at ()  |
| (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   |
| 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 |
| Tananacce, . E 5251 1  | Tallahassee, FL 32303  |





## 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)

|  |  | y as it appears on the records of the Florida Department |
|--|--|--|
|  |  |  |
| 2. The Florida doc:                      | ument/registration numbe                 | er assigned to this limited liability company is:        |
| 3. The date this me                      | ember/manager withdrew                   | /resigned or will withdraw/resign is: 01-01-2020         |
| 4. I, Jason P Holley                     | Inna of Bounay Perioning)                | hereby withdraw/resign as a                              |
| Manager Manager                          | iame of verson Kesigning)                |  |
|  | (Print Title)                            | <b></b> -  |
| of this limited lia<br>resignation in wr |  | n the limited liability company has been notified of my  |
|  | usz) P Holley                            |  |
| Signature of D                           | issociating Member of Re                 | esigning Manager   |
|  | \$25.00 (Required)<br>\$30.00 (Optional) |  |