# 00045381

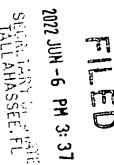
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special matructions to 1 ming Officer.				
AUG 17 2022				
A. LUNT				

Office Use Only



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#### **COVER LETTER**

TO:	_	stration Section sion of Corporations			
CUDU		TENDERFOOT NC LLC			
SUBJ	ECT:(Name of Limited Liability Company)				
The er	nclosed	d member, resignation or dis-	sociation and fee(	(s) are submitted for filing.	
Please	return	all correspondence concern	ing this matter to	:	
ANN N	a. REEI	D			
		(Contact Person)			
		(Firm/Company)			
1801.8	TH AV	E. WEST SUITE M8			
		(Address)		_	
PALM	ETTO,	FLORIDA 34221			
	-	(City/State and Zip Code)		_	
For fu	rther i	nformation concerning this r	natter, please call	:	
ANN N	M. REE	D	941 at (	741-0080	
	(N	lame of Contact Person)	(Area Cod	e & Daytime Telephone Number)	
	sed plo 5 Filin	ease find a check made payal g Fee		Department of State for:  ng Fee & Certified Copy	
		ng Address: stration Section		Street Address: Registration Section	
	Divis	sion of Corporations		Registration Section Division of Corporations	
	P.O.	Box 6327 hassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 81	
	тана	massee, FL 52514		Tallahassee, FL 32303	



### FILED

2022 JUN -6 PM 3: 37

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)

	limited liability company a DERFOOT NC LLC	s it appears on the records of the Florida Department
2. The Florida doci	ument/registration number a	assigned to this limited liability company is:
L17000045381		
3. The date this mo	mber/manager withdrew/re	signed or will withdraw/resign is:
4. 1, ANN M. REED		, hereby withdraw/resign as a
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a
MGR		
· • • • • • • • • • • • • • • • • • • •	(Print Title)	
of this limited lia resignation in wr		he limited liability company has been notified of my
an	M-Reed	
Signature of D	issociating Member or Resi	gning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	