117000080777

(Re	equestor's Name)	 		
(Ad	ldress)			
(Ad	ldress)			
(Cit	iy/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



500391437015

07/22/22--01023--028 +*55.00

57:11:75 57:75:53 57:41:73 57:75:53 57:41:73 57:75:53

nontowood a

COVER LETTER .

TO: Registration Section		
Division of Corporations		
SOUTHEAST POOLS, LLC		
SUBJECT:		
	mited Liability Cor	npany)
The enclosed member, resignation or disso	ciation and fee(s	e) are submitted for filing.
Please return all correspondence concernin	g this matter to:	
KATHLEEN BUSHAW		
(Contact Person)		_
SOUTHEAST POOLS, LLC		
(Firm/Company)		<u></u>
8297 CHAMPIONSGATE BLVD., #348		
(Address)		_
CHAMPIONSGATE, FL 33896		
(City/State and Zip Code)		-
For further information concerning this ma	itter, please call:	
KATHLEEN BUSHAW	407	750-1146
	at (_)
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed please find a check made payable ☐ \$25 Filing Fee		Department of State for:
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations The Control of Tallahassaa
P.O. Box 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

Tallahassee, FL 32314



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)

SOU	e limited liability company as THEAST POOLS, LLC	s it appears on the records of the Florida	Department
2. The Florida doc	ument/registration number a	ssigned to this limited liability company	is:
		· FEBRUAI	RY 1, 2022
3. The date this mo	_	signed or will withdraw/resign is:	7.3
4. 1, (Print) AUTHORIZED N	Name of Person Resigning)	, hereby withdraw/resign as a	13
<u> </u>	(Print Title)		
resignation in w		ne limited liability company has been not	ified of nly
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)		