

617 000 158313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

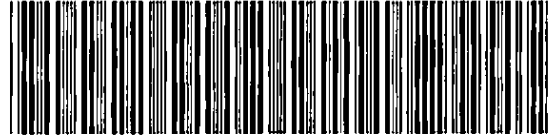
(Business Entity Name)

(Document Number)

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17 DEC -6 AM 7:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

• • •

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PEGASUS LAND & TITLE LLC  
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to:

O'Neil Cooper  
(Contact Person)

PEGASUS LAND & TITLE LLC  
(Firm Company)

15842 Stable Run Drive  
(Address)

Spring Hill, Florida, 34610  
(City, State and Zip Code)

For further information concerning this matter, please call:

O'Neil Cooper                                 407             4921895  
— — — — — 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

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: **PEGASUS LAND & TITLE LLC**

2. The Florida document/registration number assigned to this limited liability company is:  
**L17000158313**

3. The date this member/manager withdrew/resigned or will withdraw/resign is: **11/17/2017**

4. I, **Khalil Majied**, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

**Manager**

*(Print Title)*

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

Signature of Dissociating Member or Resigning Manager

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

17 DEC - 6 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA