

**L18 0000 17573**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

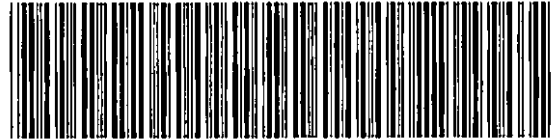
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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**900352470499**

09/24/20--01000--013 \*\*25.00

**FILED**

**2020 SEP 24 P 2:42**

**CLERK OF STATE  
TALLAHASSEE, FLORIDA**

10/30/20

VS

10/29  
VS



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: Tip-a-Roo Consulting LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L18000017573

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/01/20

4. I, Thomas D Johnson, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Managing Partner  
*(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)

CLERK OF STATE  
TALLAHASSEE, FLORIDA

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