

L18 0000 20437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

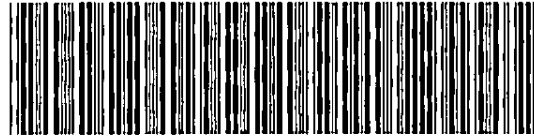
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Resignation or
dissociation of manager/
member

06/11/21--01021--004 **55.00

FILED
2021 JUN 11 AM 10:41
SECRETARY OF STATE
CLERK OF COURTS

JUL 15 2021
A RAMSEY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jay's Quality Tree Service L.L.C.
(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:

Roberta Jackson
(Contact Person)

Jay's Quality Tree Service L.L.C.
(Firm/Company)

1360 Orange St
(Address)

Apopka, FL 32703
(City/State and Zip Code)

For further information concerning this matter, please call:

Roberta Jackson at (407) 358 4188
(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
Tallahassee, FL 32303

FILED

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SECRETARY OF STATE
PALM BEACH, FLORIDA



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: Jay's Quality Tree Service L.L.C.

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

L180000020437

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/3/21

4. I, Lyndon Jackson, hereby withdraw/resign as a
(Print Name of Person Resigning)

member.
(Print Title)

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

Robert Jackson

Signature of Dissociating Member or Resigning Manager

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