## 111800001111

| (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: |
| J. HORNE<br>JUN 2 1 2024                |
|   |

Office Use Only



100430585921

06 708 24--08013--082 \*\*\$6.88

7024 JULY -5 PH 4:48

## COVER LETTER

| TO:        | Registration Section Division of Corporations  |   |
|------------|--|---|
| SUBJ       | ECT: South Bay Home Service (Name of Limited Liability)  | lompany)  |
| The er     | nclosed member, resignation or dissociation and fed  | e(s) are submitted for filing.  |
| Please     | return all correspondence concerning this matter to  | o:  |
| Pe         | ter Zachmann (Contact Person)  |   |
| 5.         | outh Bay Home Services LLC (Firm/Company)  |   |
| <u> 48</u> | 232 Sandy Glen Way (Address)   |   |
| <u> </u>   | imayma, FL 33598<br>(City/State and Zip Code)  |   |
| For fu     | rther information concerning this matter, please ca  | II:   |
| Peto       | er Zachnann at (410<br>(Name of Contact Person) (Area Co   | ) 241-1992<br>de & Daytime Telephone Number)  |
|            | sed please find a check made payable to the Florida<br>5 Filing Fee                                | a Department of State for:<br>ing 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, F1, 32303 |







## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

| 1. The name of the I                        | imited liability company as it appears on the records of the Florida Department   |
|---|---|
| of State is: <u>So</u> v                    | ith Bay Home Services LLC.  |
| 2. The Florida docur                        | nent/registration number assigned to this limited liability company is:           |
| <u> 18000 0</u>                             | 64111   |
| 3. The date this men                        | iber/manager withdrew/resigned or will withdraw/resign is: 5/18/84                |
| 4.1. Mack W                                 | hereby withdraw/resign as a me of Person Resigning).                              |
| Member "                                    | Print Title)  |
| of this limited liab<br>resignation in writ | lity company and affirm the limited liability company has been notified of mying. |
| Signature of Dis                            | sociating Member or Resigning Manager   |
| Filing Fee:<br>Certified Copy:              | \$25.00 (Required)<br>\$30.00 (Optional)  |