

118000810072

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

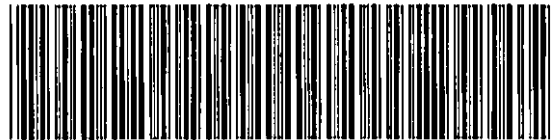
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100315866531

07/23/18--01009 007 *#25.00

2018 JUL 23 AM 9:48
SECURITY STATE
TALLAHASSEE, FLORIDA

FILED

115
11/28/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Paradise Garden & Decor
(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:

Timothy Watson
(Contact Person)

Paradise Garden & Decor
(Firm/Company)

3972 Titan St
(Address)

North port FL 34286
(City/State and Zip Code)

For further information concerning this matter, please call:

Tim Watson at (941) 364-8381
(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: Paradise Garden & Decor LLC

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

L18000086072

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7-16-2018

4. I, Jonathan Swartz, 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]
Signature of Dissociating Member or Resigning Manager

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

FILED
2018 JUL 23 AM 9:48
JONATHAN SWARTZ
TALLAHASSEE, FLORIDA