

L18 0000 87773

160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

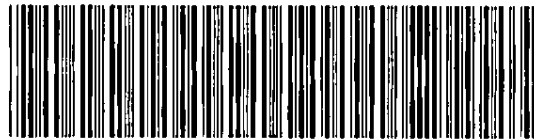
(Business Entity Name)

(Document Number)

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SEC. CLERK OF STATE
TALLAHASSEE, FL

L25

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 9771 PARTNERS 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:

Mark D Hobson

(Contact Person)

Halloran Farkas + Kittila LLP

(Firm/Company)

80 SW 8th Street

(Address)

Miami, FL 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark D Hobson

305

456-2122

at ()

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
X \$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



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: 9771 PARTNERS LLC
2. The Florida document/registration number assigned to this limited liability company is:
L18000087773
3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 17, 2024
4. I, Jacque Huttoe, 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.

DocuSigned by:

Jacque Huttoe

23635E9DE99B464

Signature of Dissociating Member or Resigning Manager

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

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2024 MAY -2 PM 3:30
SECRETARY OF STATE
TALLAHASSEE, FL