

L18000 147469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2024 AUG 20 PM 1:17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Trolls Properties, 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:

Daniel Lovas
(Contact Person)

The Trolls Properties, LLC
(Firm/Company)

2700 Glades Circle Suite # 116
(Address)

Weston, FL 33327
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel Lovas at (954) 775-4221
(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
2024 AUG 20 PM 1:17
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT

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: The Trolls Properties, LLC

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

L18000147469

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/18/2024

4. I, TOEBJOEN LOVAS, 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 Toebjoen Lovas

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

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DIVISION OF CORPORATIONS

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DIVISION OF STATE
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TALLAHASSEE, FLORIDA

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3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/18/2024

4. I, TOEBURN LOUIS, 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.

x [Signature]
Signature of Dissociating Member or Resigning Manager Toeburn Louis

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