

48000282953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

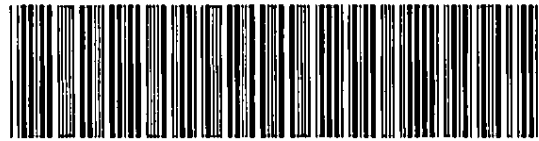
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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U4/23/19--01011--024 **50.00

FILED
19 APR 23 PM 5:37
TALLAHASSEE, FLORIDA

O SIMMONS

MAY 03 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: North 26 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:

Catherine Ruhland
(Contact Person)

North 26 LLC
(Firm/Company)

4730 Ricara Dr.
(Address)

Boulder, CO 80303
(City/State and Zip Code)

For further information concerning this matter, please call:

Catherine Ruhland at (720) 220-7580
(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)

FILED
19 APR 23 PM 5:37
NOTARY PUBLIC STATE OF FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: North 26 LLC

2. The Florida document/registration number assigned to this limited liability company is:
L18000282953

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Dec. 31, 2018

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

AMBR
(Print Title)

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

[Handwritten Signature]

Signature of Dissociating Member or Resigning Manager

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

NICOLE LEADENS
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID# 20154042274
MY COMMISSION EXPIRES 10/28/2019

This was signed before
me on April 18, 2019.

in the County of Boulder
State of Colorado.

Nicole Leadens