## 1900001251

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## **COVER LETTER**

<b>TO:</b> Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: MAKE 4, LLC	
(Name of	Limited Liability Company)
The enclosed member, resignation or dis	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:
Russell Bennett	
(Contact Person)	
MAKE 4, LLC	
(Firm/Company)	
6520 US 301 South Ste 118	
(Address)	
Riverview, Florida 33578	
(City/State and Zip Code)	
For further information concerning this r	natter, please call:
Russell Bennett	at ( <u>813</u> ) <u>5807877</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payal	ble to the Florida Department of State for:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO:



## 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 reco	ords of the Florida Department
of State is: MAK	E 4, LLC		
2. The Florida docu	ument/registration number	assigned to this limited	liability company is:
L19000001251		·	
3. The date this me	mber/manager withdrew/r	resigned or will withdray	v/resign is: 1 December 2020
4. I. Brittany Bennett	lame of Person Resigning)	, hereby withdra	w/resign as a
MGR	(Print Title)		
of this limited lia resignation in wr	• • •	the limited liability con	npany has been notified of my
(i)	ining.		2920 DEC
Signature of Di	ssociating Member or Res	signing Manager	-7 P
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		6. 6