

L1900000 5837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

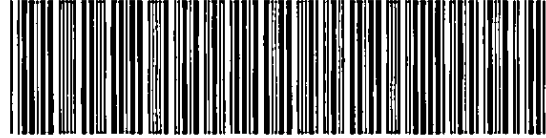
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300322763103

2010 JUN 16 11:45 AM

FILED
2010 JUN 16 A 3:35
TALLAHASSEE, FLORIDA

1/23/1905

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Imagine Platinum Realty, 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:

Brandt Mathers

(Contact Person)

Imagine Platinum Realty, LLC

(Firm/Company)

3660 Summerwind Circle

(Address)

Bradenton, FL 34209

(City/State and Zip Code)

For further information concerning this matter, please call:

Brandt Mathers

at (941) 720-0408

(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

FILED
2019 JUN 16 A 3:35
TALLAHASSEE, FLORIDA
CLERK OF COURT



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: Imagine Platinum Realty, LLC

2. The Florida document/registration number assigned to this limited liability company is: L19000005837

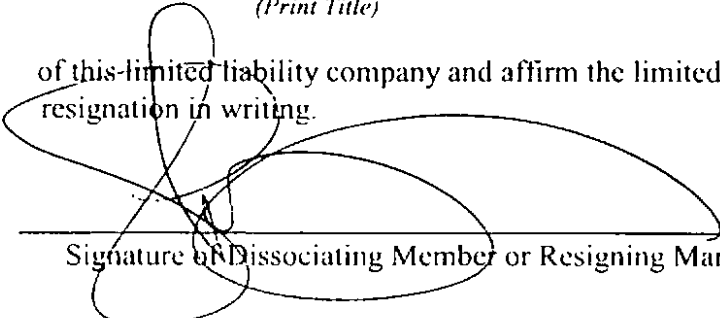
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/13/2019

4. I, Shellie Young, 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.


Signature of Dissociating Member or Resigning Manager

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