119000085128

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
	2	

Office Use Only



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COVER LETTER

TO: Registration Section				
Division of Corporations				
SUBJECT: INSPIRED FOR GROWTH LLC				
(Name of Lim	ited Liability Con	mpany)		
The enclosed member, resignation or dissoci	iation and fee(s) are submitted for filing.		
Please return all correspondence concerning	this matter to:			
BARBARA J BOTTOMMS		_		
(Contact Person)				
INSPIRED FOR GROWTH LLC		_		
(Firm/Company)			2	-
206 DRUID HILLS RD	·	_	22 0CT 17	1
(Address)			ī 7	
TEMPLE TERRACE FL 33617			Ē	٠
(City/State and Zip Code)		_		.:
For further information concerning this matter	er, please call:		7 : 39	: <u>: :</u>
BARBARA J BOTTOMMS	_ at (802	681-8394		
(Name of Contact Person)	(Area Code	e & Daytime Telephone Number)		
Enclosed please find a check made payable t \$\Begin{align*} \Begin{align*} \Begi		Department of State for: g Fee & Certified Copy		
Mailing Address:		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tailahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 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)

1. The name of the limited liability company as it appears on the records of the Florida De	epartmen	t
of State is: INSPIRED FOR GROWTH LLC		
2. The Florida document/registration number assigned to this limited liability company is:	:	
L19000085128		
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/10/2022		_
4. I, ROBERT M ALEXANDER , hereby withdraw/resign as a (Print Name of Person Resigning)	22 OCT	<u>-</u>
AMBR	17	
(Print Title)	3	
of this limited liability company and affirm the limited liability company has been notific resignation; in writing.	ed of my	, \$\frac{1}{2}\frac{1}
Signature of Dissociating Member or Resigning Manager		

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)