## L19000125242

(Re	equestor's Name)	
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(Address)		
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status
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Special Instructions to Filing Officer:		
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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: M.R.	Hague Enterprises (Name of Limited Liability Company)	LLC
The enclosed member, resignation	on or dissociation and fee(s) are submitted for fili	ing.
Please return all correspondence	concerning this matter to:	
Michile Ga (Contact Pers	rrett on)	
M.R. Hague	Enterprise LLC	
167 Buckanan	Circle	
Sat Suma F	L 32189	
For further information concerning	ng this matter, please call:	
Michille Garre (Name of Contact Person	at (386) 451-814 (Area Code & Daytime Telephone Nor 386-244-8090 (he)	Number)
Enclosed please find a check mad \$25 Filing Fee \$30 Certified ope	de payable to the Florida Department of State for   \$55 Filing Fee & Certified Copy	r:
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporati The Centre of Tallaha 2415 N. Monroe Street	assee et, Suite 810



## 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: M. R. Hague Enterprises LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L 19000125242
3. The date this member/manager withdrew/resigned or will withdraw/resign is: $\frac{OI}{A5}$
4. I. Michelle Garrett , hereby withdraw/resign as a (Print Name of Person Resigning)
Manage (Primi Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Michelle Family
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)  Certified Conv. \$30.00 (Required)
Certified Copy: \$30:00 (Optional)