

L19000 134432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

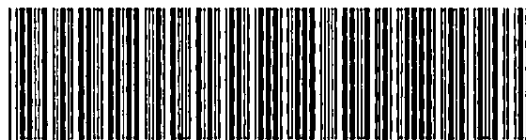
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 NOV 12 AM 7:05
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DEC 1 2020

COVER LETTER

TO: Registration Section
Division of Corporations

Nature Safe Solutions
LLC

SUBJECT: _____
(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:

Michael Hutcherson
(Contact Person)

Nature Safe Solutions LLC
(Firm/Company)

120 W Central ave Suite 3
(Address)

Winter Haven, FL 33880
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Hutchison at (813) 245-1791
(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**Mailing Address:**

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



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: Nature Safe Solutions LLC

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

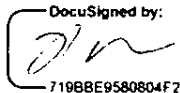
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3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8-24-2020

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

Title Amber
(Print Title)

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

DocuSigned by:

719BBE9580804F2

Signature of Dissociating Member or Resigning Manager

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