

L20 000005770

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

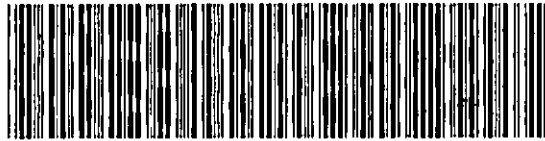
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2020 JAN 24 AM 11:02
STATE OF ARIZONA
TALLAHASSEE, FL 32304

Resignation

FEB 19 2020

LAI BRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lost or Found 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:

Gary Maxwell
(Contact Person)

Lost or Found LLC
(Firm/Company)

1213 54th ST S
(Address)

Gulfport FL 33707
(City/State and Zip Code)

For further information concerning this matter, please call:

Gary MAXWELL at (927) 712-7036
(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 Paid V# 2106 ☐ \$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

FILED
2020 JAN 24 AM 11:02
SECRETARY OF STATE, FLORIDA

**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: Lost or Found LLC

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


L20000005770

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 19 Jan 2020

4. I, Tracy M. Hansen, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGRM
(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)