

L20 0000 11116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

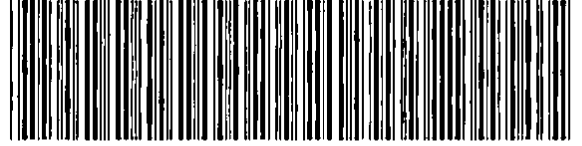
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100409217681

7/6/23

FILED  
JUN 11 AM 11:00  
2023

VLM



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: THE QUALITY NEST LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L200000111116

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 4/23/2020

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

AR  
(Print Title)

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

Linda M. Webb

Signature of Dissociating Member or Resigning Manager

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

FILED

JUN 11 AM 11:11