## L20000 64976

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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## **COVER LETTER**

Division of Corporations Madu Realty, 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: Mutaqee Akbar (Contact Person) (Firm/Company) 619 North Copeland Street (Address) Tallahassee, FL (City/State and Zip Code) For further information concerning this matter, please call: Mutaqee Akbar (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:** Street Address: **Registration Section** Registration Section **Division of Corporations Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

TO:

Registration Section



June 2, 2020

MUTAQEE AKBAR 619 NORTH COPELAND STREET TALLAHASSEE, FL

SUBJECT: MADU REALTY, LLC Ref. Number: L20000064976

We have received your document for MADU REALTY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Need the signature of Madu Akbar.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 520A00010911

Diane Cushing Senior Section Administrator

www.sunbiz.org



## 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: Madu	Realty, LLC	
2. The Florida doci	ument/registration number assigned to	this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or w	rill withdraw/resign is: 5-5-2020
4. I, Madu Akbar	, here	eby withdraw/resign as a
Manager	ame by I crown Reingming	
	(Print Title)	
of this limited lia resignation in wr	• •	iability company has been notified of my
Mad	u Kk	- <u>-</u>
Signature of Di	issociating Member or Resigning Mana	ager
	\$25.00 (Required) \$30.00 (Optional)	
centities copy.	φουίου (Optional)	