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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

N PANCH PROPERTY LLC, nited Liability Company)
iation and fee(s) are submitted for filing.
this matter to:
KNCH-FROPERTY, LLC.

er, please call:
3055150135 at (
at (Area Code & Daytime Telephone Number)
to the Florida Department of State for:
☐ \$55 Filing Fee & Certified Copy
in the second of
Street Address:
Registration Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



October 25, 2021

MYHANH LOUDEN 500 S. FEDERAL HWY # 1641 HALLANDALE, FL 33008

SUBJECT: 1250 RED MOUNTAIN RANCH PROPERTY LLC

Ref. Number: L20000206311

We have received your document for 1250 RED MOUNTAIN RANCH PROPERTY LLC and your check(s) totaling \$525.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ENTITY WAS VOLUNTARILY DISSOLVED 09/28/2021. ENTITY MUST BE ACTIVE TO FILE AMENDMENT.

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

Letter Number: 921A00025882

Alecia Rivers Regulatory Specialist II

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 appe	ears on the recor	ds of the Florid	a Depart	tment	
of State is: Z	SU RED	MOUNTAIN	RANCH	PEOPERT	<u>y</u> , L	<u>- L</u> 은,	
2. The Florida docu	ıment/registratio	n number assigned	to this limited l	iability compan	y is:		
L 20000	206311						
3. The date this me	mber/manager w	/ithdrew/resigned o	r will withdraw	/resign is:	21		
MYHANH LOU	DEN	gning) , t					
	EPRESENTATIVE						
	Print Title)	· · · · · · · · · · · · · · · · · · ·					
of this limited liab resignation in wri		nd affirm the limite	ed liability comp	oany has been n	oun⊠ o ≧≘		ब्द्ध मुक्का ने संस्था ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्थ ने संस्य ने संस्य ने संस्य ने संस्य न संस्य न स न स न स न स न स न स न स न स न स न
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Signature of Di	ssociating Memi	ber or Resigning M	anager			Ē	
Filing Fee: Certified Copy:	, ,	•			四計	9: 23	التعيدا