## LZO 0002557ZZ

(Re	equestor's Name)				
(Ac	idress)				
(Address)					
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(Ci	ty/State/Zip/Phone #	)			
PICK-UP	☐ WAIT	MAIL			
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ASS/Resign

## **COVER LETTER**

TO:	Regi	stration Section		
	Divis	sion of Corporations		
SUBJ	ECT:	Jasper Automotive Group, LLC		
		(Name of	Limited Liability C	ompany)
The er	nclosed	d member, resignation or dis-	sociation and fee	(s) are submitted for filing.
Please	e returr	all correspondence concern	ing this matter to	):
Jerrad	P. Jaspe	r		
		(Contact Person)		<del></del>
Jasper .	Automo	otive Group, LLC		
	_	(Firm/Company)		
In Oce	an Oaks	s Lane		
		(Address)		
Palm C	loast, FI	. 32137		
		(City/State and Zip Code)		
For fu	rther is	nformation concerning this n	natter, please cal	<b>l</b> :
Jerrad I	P. Jaspe	r	321 at (	333-2222
	(N	ame of Contact Person)		le & Daytime Telephone Number)
		ase find a check made payab	ole to the Florida	Department of State for:
<b>■</b> \$25	5 Filing	g Fee	□ \$55 Filii	ng Fee & Certified Copy
		ng Address:		Street Address:
		stration Section		Registration Section
		ion of Corporations Box 6327		Division of Corporations
		box 6527 hassee, FL 32314		The Centre of Tallahassee
	rana	nassee, rt. 52514		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)

of State is:	r Automotive Group, LLC	
2. The Florida doc 1.20000255722	ument/registration number a	ssigned to this limited liability company is:
		signed or will withdraw/resign is: October 12th, 2020
4. I, Austin Ray Jaspe		, hereby withdraw/resign as a
(Print A Member MGR	ame of Person Resigning)	
	(Print Title)	
resignation in wr		ne limited liability company has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	250 OCT 15
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