

L20000263900

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

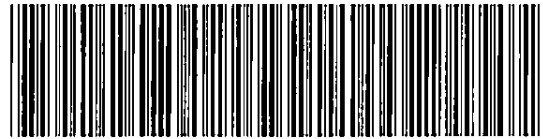
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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27 JUL 24-- 11:52--001

2024 JUL 11 PM 11:54
CORPORATE
FILING
OFFICE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MILLENNIUM LEADER 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:

SANCHEZ ENRIQUE

(Contact Person)



(Contact Company)

7520 E HWY 25

(Address)

BELLEVIEW FL 34420 UNIT #1

(City, State and Zip Code)

For further information concerning this matter, please call:

SANCHEZ ENRIQUE

(Name of Contact Person)

at (352) 3613454

(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:
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

**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: MILLENNIUM LEADER L.L.C.

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

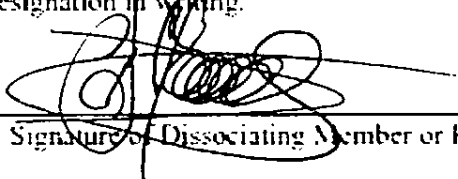
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3. The date this member manager withdrew/resigned or will withdraw resign is: 06/01/24

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

MGR
(Print Title)

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

X 

Signature of Dissociating Member or Resigning Manager

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

2024 JUL 11 PM 11:54
SECRETARY OF STATE
TALLAHASSEE, FL