## L20000315572

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## COVER LETTER

Registration Section TO: Division of Corporations Florida Regenerative Partners, 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: Michele Farine (Contact Person) Florida Regenerative Partners LLC (Firm/Company) 10420 S 301 Hwy (Address) Riverview, FL 33578 (City/State and Zip Code) For further information concerning this matter, please call: Michele Farine (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy **■** \$25 Filing Fee Mailing Address: Street Address: Registration Section **Registration Section Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## FLORIDA DEPAREMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605 0216, Florida Statutes)

Florid	Timited liability company as it appears of a Regenerative Panners, LLC	on the records of the Florida Department
2. The Florida doc L20000315572	ument registration number assigned to th	us limited hability company is
3. The date this me	ember manager withdrew resigned or wil	l withdraw resign is:
4 1. Bonnie S Rodgers  **Frint N  Member and Mana	iame of Person Resigning. hereb	y withdraw resign as a
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of this limited ha resignation in wr	hility company and affirm the limited lia	
Signature of D	issociating Member or Resigning Manag	2021 JAN 26
Filing Feet Certified Copyr	\$25,00 (Required) \$30 00 (Optional)	26 PM II: