## LZ0 000 340035

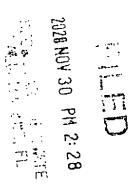
(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Duninga Fatik Nama)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		

Office Use Only



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## COVER LETTER

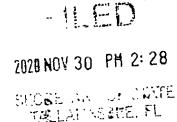
Division of Corporations	
SUBJECT: Forida Spina Sona Sona Sona Sona Sona Sona Sona So	Juling UC Liability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Randall Hebert (Contact Person)	·
Florida Spinal Solutions Le	
227 SE 8th Street Ocala FL (Address)	3411
OCATA FL 34471 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
Kristy Benefield at (Name of Contact Person) at (	352 ) 396 - 0217 . Area Code & Daytime Telephone Number)
Englosed please find a check made payable to the   ✓ \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314





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 commany as it appears on the rewards of the Florida Denostment
1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: Florida Spinal Solutions Luc.
2. The Florida document/registration number assigned to this limited liability company is:
L20000 34 0035
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/26/2020
4. 1. Ushn Brantley hereby withdraw/resign as a (Print Name of Person Resigning)
Member (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Ahw. Bur
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)