LZC 000365430

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)
(30	2 ,	,
(Dc	ocument Number)	
(00	cument Number)	
Certified Copies	_ Certificates o	f Status
	<u> </u>	
Special Instructions to	Filing Officer:	
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Office Use Only



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3/8/21

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: NP LAND HOLDINGS LLC	
(Name of Lir	nited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to:
ERIK J. ARROYO, ESQ.	
(Contact Person)	
BAND GATES & DRAMIS, PL	
(Firm/Company)	
2000 00000 000 0000 0000 000	
2070 RINGLING BOULEVARD (Address)	
, ,	
SARASOTA, FL 34237	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Ç	•
ERIK J. ARROYO, ESQ.	at (941) 366-8010
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Fortered classes God a dead and acception	and a Florida Danagarana - CCasa Com
Enclosed please find a check made payable \$\Begin{align*} \Begin{align*} \Begin	☐ \$55 Filing Fee & Certified Copy
= 323 Filing Fee	□ 355 Fining Fee & Certified Copy
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



FILED

2021 JAN 25 PH 4: 52

SECRETARY OF STATE TALLAHASSEE, FI

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 compan	y as it appears on the records of the Florida Department
of State is: NP L	AND HOLDINGS LLC	
2. The Florida docu	ument/registration numb	er assigned to this limited liability company is:
L20000365430		·
3. The date this me	mber/manager withdrew	/resigned or will withdraw/resign is: 1/19/2021
4. I, MATTHEW LA (Print N	NDSMAN lame of Person Resigning)	, hereby withdraw/resign as a
ASSOCIATE ME	EMBER (Print Title)	<u>_</u> .
of this limited liab resignation in wr		m the limited liability company has been notified of my
Signature of Di	ssociating Member or R	csigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	