## 120000353152

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## **COVER LETTER**

(i) Construction Section Decision of Corporations

SUBJECT: Ringer's Full Circle Lawn Care LLC (Name of Limited Liability Company)

a least cased men ber, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Brian Ringer (Contact Person)
Ringer's FullCircle Lawn Care LLC
1845 Sunset Ridge DR.
Mascotte, FL 34753 (City/State and Zip Code)

For further ir formation concerning this matter, please call:

Brian Ringer at (352) 551 (0590 (Nume of Condict Person) (Area Code & Daytime Telephone Number)

<u>Mating Address</u> Regretration Section Division of Corporations P.O. Box 6327 Tellahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303

CR2E079 (2.14)



## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY (Pursuant to 605 0216, Elorida Statutes)

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Der

of State is: Ringer's Full Circle lawn lare LLC

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

## L20000383182

3. The date this member/manager withdrew/resigned or will withdraw/resign is:  $\frac{\text{Peo} 3\sigma}{\partial 0} \partial 0 \partial 0$ 

£. 1	Carles Muniz	, hereby withdraw/resign as a
	(Print Name of Person Resigning)	

Am BR (Print Title)

of this builted liability company and affirm the limited liability company has been notifieresignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee:S25.00 (Required)Certified Copy:\$30.00 (Optional)