K21000000386

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	me)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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November 3, 2021

LAPATSIN YAUHEN 619 CARSWELL AVE, UNIT 3 HOLLY HILL, FL 32117

SUBJECT: PJI GROUP LLC Ref. Number: L21000000386

We have received your document for PJI GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

TO REMOVE A MEMBER FROM AN ENTITY, PLEASE COMPLETE AND RETURN ENCLOSED FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 121A00026733

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

COVER LETTER

Division of Corporations	
SUBJECT: PJI GROUP, L (Name of Limit	d Liability Company)
The enclosed member, resignation or dissociate	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to:
Barsegran Roman (Contact Person)	
Pyi GROUP LLC (Firm/Company)	<u> </u>
619. Carswell ave unit	3
Holly Hill FL 32117 (City/State and Zip Code)	
For further information concerning this matter	, please call:
John (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to ☐ \$25 Filing Fee	the Florida Department of State for: ☐ \$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



FILED 2021 NOV 19 PM 3: 13

SECRETARY OF STATE TALL AHASSEE, FL

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)

	limited liability company as it appears on the records of the Florida Department
	iment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 10.30.201/
	in Youhen, hereby withdraw/resign as a aume of Person Resigning)
M	GRina Tide)
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Turya	Monafin
Signature 61 Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)