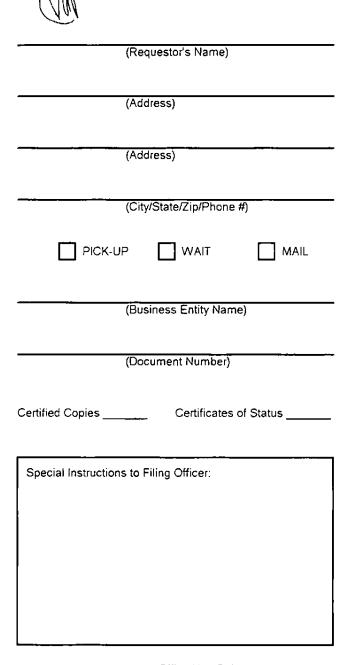
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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it app	pears on the records of the Florida Departr	ment
		d to this limited liability company is:	<b></b> ·
3. The date this mo	mber/manager withdrew/resigned  1 Dans Comments  ame of Person Resigning)	or will withdraw/resign is: 10/13/2 hereby withdraw/resign as a	<u>1_</u> 3
	(Print Title)	ted liability company has been notified of	· mv
resignation in wr		see hability company has been nothing of	my
Signature of D	ssociating Member or Resigning N	1anager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	2024 JAN SECTIALLI	71

## COVER LETTER

SUBJECT: GODDWAN MINISPRIES LLC			
(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:			
JOHN GODDINAN			
(Contact Person)			
GOLDMAN MINISMIES			
(Firm/Company)			
13900 YENON BUFF RD			
(Address)			
TAZICOUNE & 32226 (City/State and Zip Code)			
For further information concerning this matter, please call:			
JETIN GEEDMAN 31, 90+, 631-5441			
(Name of Contact Person) (Area Code & Daytime Telephone Number)			

Enclosed please find a check made payable to the Florida Department of State for:

Mailing Address:

\$25 Filing Fee

Registration Section

Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

☐ \$55 Filing Fee & Certified Copy

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303