## L21000014078

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## COVER LETTER

TO: Registration Section Division of Corporations Mr. Jackson Master Handyman SUBJECT: (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: Loretta Harvey (Contact Person) Mr. Jackson Master Handyman LLC (Firm/Company) 3329 Royal St. (Address) Winter Park, Fl 32792 (City/State and Zip Code) For further information concerning this matter, please call: 369-8503 Loretta Harvey (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **■** \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## 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 company as	s it appears on the records of the Florida Departm	ient
of State is: Mr. Ja	tekson Master Handyman LLC		<del></del> ·
2. The Florida docu	ument/registration number a	ssigned to this limited liability company is:	
L21000014078			
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is:	
4. I. Fernando Jackson		, hereby withdraw/resign as a	
Manager	ame sy recision recognize		
	(Print Title)		
resignation in wri	iting.	gning Manager	70 MAR 15 AH 7: 22
<del></del>	\$25.00 (Required) \$30.00 (Optional)	- · · ·	