## LZ1000028284

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## **COVER LETTER**

TO: Registration Section Division of Corporations

wality Institute SUBJECT: Nationa Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Heather Amador Delaporte National Indoor Air Quality Institute UC 214 N. 3rd St. Suite B Leesburg, H. 34748 City/State and Zip Code heather. Uls a gmail. Com E-mail address: (to be used for futy annual report notification)

For further information concerning this matter, please call:

Lappy Le at (407) 490-8039 Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

## Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Street Address: Registration Section Division of Corporations The Centre of Tallahassee



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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)

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

of State is: Florida

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

L210000 28284.

3. The date this member/manager withdrew/resigned or will withdraw/resign is:  $5 \cdot 24 - 2022$ 

4. I, <u>Megan Marie (ocho</u>, hereby withdraw/resign as a (Prike Name of Person Resigning)

Managing Member.

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)