L21000036696

(Re	questor's Name)	
bA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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May 25, 2021

AMY BABBITT 4215 MADERIA AVE SEBRING, FL 33872

SUBJECT: SEBRING TREELANCERS LLC

Ref. Number: L21000036696

We have received your document for SEBRING TREELANCERS LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for RA resignation. Ernest wilkie is not R in the company.

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

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: 721A00011221

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

COVER LETTER

TO:	Registration Sect Division of Corpo						
SUBJ	ECT:	SEBRIN	G TV	FILAN	CERS	ЦC	
		(Name	of Limited L	iability Com	pany)		
The en	nclosed member, re	signation or	dissociation	and fee(s)	are subm	itted for	filing.
Please	return all correspo	ondence conc	erning this r	natter to:			
	Amy	BARB'	iT- hu	H AM MUF	Ð		
	SEBENU6 (FI	TICPE) rm/Company)	anctus	LIC			
_ 47	DIS MADEL	Address)	?				
	SEBE WO	FL 338	572 <u> </u>				
For fu	rther information c	oncerning th	is matter, pl	ease call:			
ΛM	Y BABBIT	MAHUM -	mAP_at(267_	298	-73	86
	(Name of Conta	ect Person)	(.	Area Code a	& Daytime	Telepho	ne Number)
	sed please find a cl 5 Filing Fee	\wedge	ה 🗷	\$55 Filing	Fee & Ce	of State rtified C	for: opy
	Mailing Address: Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL 3	ion orations 32314	Previous Pre	14 25 cs	Street Addi Registrati Division of The Centr 2415 N. M Tallahasso	ress: on Section of Corpo re of Tall Monroe S	on rations lahassee Street, Suite 810
CR2E07	19 (2/14)		CX	3/10/2	21		



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 compan	y as it appears on the records	of the Florida Department
of State is:	SEBRING	TREELANCERS	uc
2. The Florida doc	ument/registration numb	er assigned to this limited liab	oility company is:
3. The date this me	ember/manager withdrew	/resigned or will withdraw/re	sign is: 2/28/10
		, hereby withdraw/re	
	CONTINE (Prim Title)		
of this limited lia resignation in wr	-	m the limited liability compar	ω
	wst Minu issociating Member or R	osionina Manager	11.1.32 PII 1:32
Signature of D	izzociating intemper or K	esigning manager	
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		