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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(
(Document Number)						
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COVER LETTER

то:	_	stration Section sion of Corporations		
SUBJ	ECT:	LIVING IN PURPOSE, LLC		
		(Name of	Limited Liability Co	mpany)
The e	nclosed	d member, resignation or dis	sociation and fee(s) are submitted for filing.
Please	e return	all correspondence concern	ing this matter to:	
MEGA	AN S. BO	OGGS		
		(Contact Person)		_
LIVIN	IG IN PU	JRPOSE, LLC		-
		(Firm/Company)		_
6717 F	BONNIE	BAY CIR N.		
		(Address)		_
PINEL	.LAS P/	ARK, FL 33781 US		
		(City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	_
For fu	irther ii	nformation concerning this r	natter, please call	
Mε	ECAN	130665	at (10 1) (o	2005 - 9008 e & Daytime Telephone Number)
	(N	ame of Contact Person)	(Area Code	e & Daytime Telephone Number)
	sed ple 5 Filing	ase find a check made payal g Fee		Department of State for: g Fee & Certified Copy
	5 6 - 111	4 4 4		Church Adduson
		ng Address: stration Section		Street Address: Registration Section
	Divis	ion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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)

	imited liability company as G IN PURPOSE, LLC	it appears on the records of the	ne Florida Department
2. The Florida docu	ment/registration number as	ssigned to this limited liability	company is:
3. The date this men	nber/manager withdrew/res	igned or will withdraw/resign	February 28, 2023
	me of Person Resigning)	, hereby withdraw/resign	ı as a
	rint Title)	e limited liability company ha	as been notified of my
resignation in writ			·
Signature of Dis	sociating Member or Resign	ning Manager	FIL 2023 HAR 15 SECTION AND A
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		MII: 59