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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

O SIMMC APR 1 6 2077

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Organized Grauth Maragner Solutions LL (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:
WMMMMM JOYIAN Ordway (Contact Person)
(Firm/Company)
215 Sth St NE, Apt IF
Minneapolis MN 55413 (City/State and Zip Code)
For further information concerning this matter, please call:
ORITH OROWAY at (507) 951-5458 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee S55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

FILED



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: Organized Growth Management Solutions UC.
2. The Florida document/registration number assigned to this limited liability company is:
L21000075862
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03 14 2022
4. 1. JORIAN ORDAY, hereby withdraw/resign as a (Print Name of Person Resigning)
MBR (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
July 1
Signature of Dissociating Member on Resigning Manager
Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)