

✓ L210000087447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

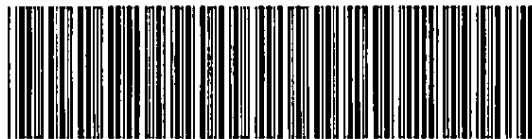
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STATE OF FLORIDA
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2022

DENNIS L. BUSH
17703 GAWTHROP DR. #103
LAKEWOOD RANCH, FL 34211

SUBJECT: MASTER GOLF MINDS LLC
Ref. Number: L21000087447

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

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.

Querida R Silas
Regulatory Specialist II

Letter Number: 222A00015603

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DIVISION OF CORPORATIONS
STATE OF FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Master Golf Minds LLC

(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:

Dennis L. Bush

(Contact Person)

Master Golf Minds LLC

(Firm/Company)

17703 Gawthrop Dr. #103

(Address)

Lakewood Ranch, FL 34211

(City/State and Zip Code)

For further information concerning this matter, please call:

Dennis L. Bush

941 465-8334
at ()

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL



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: Master Golf Minds LLC

2. The Florida document/registration number assigned to this limited liability company is:
L21000087447

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/2021

4. I, Rod Spittle, hereby withdraw/resign as a
(Print Name of Person Resigning)

COO

(Print Title)

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

x Rod Spittle

Signature of Dissociating Member or Resigning Manager

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

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TALLAHASSEE, FL