12/0001/46/2

(Req	uestor's Name)	
(Add	ress)	
•	•	
(Add	ess)	
(City/	State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
(0	Takin Ni	<u> </u>
(Busi	ness Entity Name	7)
(Doc	ument Number)	
Certified Copies	Certificates o	f Status
•		
r		
Special Instructions to Fi	ling Officer.	
1.0	ENNIS	
0 :/:	-141/12	
AUG 1 € 2023		
	·	

Office Use Only



800411806728

07/13/23--01013--018 **25.00

COVER LETTER

Division of Corporations Unified HR 1 LLC **SUBJECT:** (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: Troy Reynolds (Contact Person) **ECG** (Firm/Company) 35809 Pinegate trail (Address) Eustis, FL 32736 (City/State and Zip Code) For further information concerning this matter, please call: Troy Reynolds (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

TO:

Registration Section



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)

The Florida document/registration number	r assigned to this limited liability company is:
_	assigned to this infined habitity company is.
1.21000114612	
The date this member/manager withdrew/	resigned or will withdraw/resign is: 7/1/2023
Troy Reynolds	heroby withdraw/resign as a
I, Troy Reynolds (Print Name of Person Resigning)	, nercoy withdraw/resign as a
Managing Member	
(Print Title)	- '
of this limited liability company and affirm resignation in writing.	the limited liability company has been notified of my
/u/	

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: