L21000118442

(Reques	tor's Name)				
(Address	5)				
(Address	5)				
(City/Sta	te/Zip/Phone #)				
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					
	J DENNIS				
	JUL 2 8 2023				
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COVER LETTER

TO:	: Registration Section					
	Division of Corporations					
SUBJ	FCT:	Marion Oaks Investments, LLC				
3000		(Name of	Limited Liab	ility Cor	mpany)	
The er	nclosed	l member, resignation or dis	sociation ar	nd fee(s	s) are submitted for filing.	
Please	return	all correspondence concern	ing this ma	tter to:		
Richard	d MeInt	yre				
		(Contact Person)			_	
McInty	re Fund	ling I. LLC				
		(Firm/Company)			_	
500 E.	Kenned	y Boulevard, Suite 200				
		(Address)		_		
Tampa	. Florida	a 33602				
		(City/State and Zip Code)			_	
For fu	rther in	nformation concerning this r	natter, pleas	se call:		
Richard	d McInt	yre	84- at (511-4800	
	(N	ame of Contact Person)			& Daytime Telephone Number)	
Enclos	sed ple	ase find a check made payal	ble to the Fl	orida [Department of State for:	
■ \$25	Filing	g Fee	□ \$5	5 Filing	g Fee & Certified Copy	
	Mailir	ng Address:			Street Address:	
		stration Section			Registration Section	
		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	



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)

	on Oaks Investments, LLC	s it appears on the records of the Florida Departmen	
2. The Florida doc	ument/registration number a	ssigned to this limited liability company is:	
1.21000118442			
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign is: May 23, 2023	
David Valacause		, hereby withdraw/resign as a	
(Print N	ame of Person Resigning)		
Manager and Mer	nber		
	(Print Title)		
resignation in wr	Holospuer	ne limited liability company has been notified of m	y
Signature of Di	ssociating Member or Resig		á
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	2023 JUL 27 PH	TO SULTARY OF S