

**L21000127053**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : REGIO MANAGEMENT, LLC  
Account Number : I20200000149  
Phone : (813)570-9000  
Fax Number : (813)200-2700

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: regiommt@live.com

2021 SEP 13 AM 10:17

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
COMIC CITY J & L LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

SEP 14 2021

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2021 SEP 13 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(((H21000336971 3)))

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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2021 SEP 13 AM 10:37

1. The name of the limited liability company as it appears on the records of the Florida Department  
of State is: COMIC CITY J & L LLC

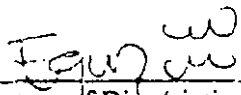
2. The Florida document/registration number assigned to this limited liability company is:  
L21000127053

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/30/2021

4. I, EGNA C GAVINO, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AUTHORIZED MEMBER (AMBR)  
(Print Title)

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

  
Signature of Dissociating Member or Resigning Manager

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