

LU000232079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

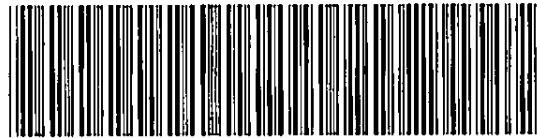
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/21/23--01000--002 **25.00

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TALLAHASSEE, FL

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R. HUNT

04/21/23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Loxley Pallet Liquidators

(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:

Nathan Virgin

(Contact Person)

Loxley Pallet Liquidators

(Firm/Company)

772 Kroegel Ave

(Address)

Sebastian, FL 32958

(City State and Zip Code)

For further information concerning this matter, please call:

Nathan Virgin

772 783-4993
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

FILED
MAR 21 AM 11:42
TALLAHASSEE, FL
DEPT. OF STATE



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2021 APR 21 AM 11:42
TALLAHASSEE, FL
DIVISION OF STATE

**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: Loxley Pallet Liquidators

2. The Florida document/registration number assigned to this limited liability company is:
L21000232079

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/30/2022

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

Authorized Member

(Print Title)

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

A handwritten signature in cursive script, reading "Laurie Anne Zydonik".

Signature of Dissociating Member or Resigning Manager

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