

121000317831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

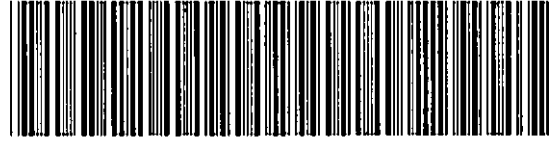
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/09/2021
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 JUL 27 PM 12:34

FILED



FILED

2021 JUL 27 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: The Ivory Event Place LLC

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

L21000317831

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/22/2021

4. I, Richard M. Miskant, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager (Contact Person)
(Print Title)

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

Richard M. Miskant
Signature of Dissociating Member or Resigning Manager

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