

LZ1 000 532 702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

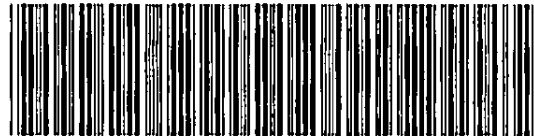
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2022 MAR -2 AM 6:44
SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS

MAR - 9 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2022

DAVID BACALLAO
125 NW 10TH AVE
CAPE CORAL, FL 33993

SUBJECT: MAGNUS HOME LLC
Ref. Number: L21000532702

We have received your document for MAGNUS HOME LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 822A00002214

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAGNUS HOME LLC

(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:

DAVID CANSINO BACALLAO

(Contact Person)

DAVID CANSINO

(Firm/Company)

125 NW 10TH AVE

(Address)

CAPE CORAL, FL, 33993

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID CANSINO

239

4761979

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



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2022 MAR -2 AM 6:44

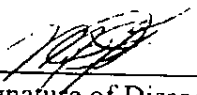
SECRETARY OF STATE
TALLAHASSEE, FL

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: Magnus Home LLC
2. The Florida document/registration number assigned to this limited liability company is:
L21000532702
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/3/2022
4. I, MAURICIO FAJARDO, hereby withdraw/resign as a
(Print Name of Person Resigning)
VICE PRESIDENT OF MAGNUS HOME LLC
(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)