## h22000022533

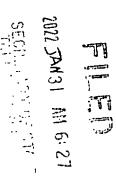
(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
•	•	,
- (Do	cument Number)	<del></del>
,	,	
Certified Copies	Certificates	s of Status
Cerumed Copies		
Special Instructions to	Filing Officer:	





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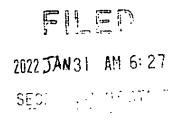
O SIMMONS FEB 0 8 2022

## **COVER LETTER**

TO:		stration Section sion of Corporations		
	151116	non or corporations		
SUBJ	ECT:	BADEN HILL FARM LLC		
		(Name of	Limited Liability C	ompany)
The er	nclosed	d member, resignation or dis	sociation and fee	(s) are submitted for filing.
Please	return	all correspondence concern	ing this matter to	o:
HALBI	ERT D	BADEN		
_		(Contact Person)		_
		(Firm/Company)	_	
11240 5	SW 114	TH COURT		
		(Address)		- <del>-</del>
MIAM	I, FL 33	176		
		(City/State and Zip Code)	_	
For fu	rther in	nformation concerning this n	natter, please call	l:
HALBI	ERT D I	BADEN	305	803-7718
	(N	ame of Contact Person)	(Area Cod	le & Daytime Telephone Number)
Enclos	sed ple	ase find a check made payab	ole to the Florida	Department of State for:
<b>=</b> \$25	Filing	g Fee	□ \$55 Filir	ng Fee & Certified Copy
		ng Address:		Street Address:
	_	stration Section		Registration Section
		ion of Corporations Box 6327		Division of Corporations
	•	hassee, FL 32314		The Centre of Tallahassee
	i aiiai	nassee, 1 12 929 17		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)





## 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)

	limited liability company as it appears on the records of the Florida Department EN HILL FARM LLC
2. The Florida docu L22000022533	ament/registration number assigned to this limited liability company is:
CLORIA E RAD	mber/manager withdrew/resigned or will withdraw/resign is:
4. 1, (Print N MEMBER/MANA	, hereby withdraw/resign as a ame of Person Resigning)
- (	Print Title)
of this limited lial resignation in wri	oility company and affirm the limited liability company has been notified of my ting.
Alous 7 \$	
Signature of Di	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)