

122000050349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

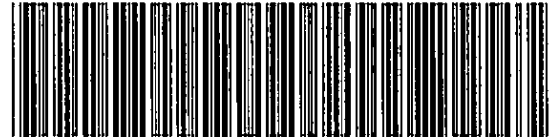
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700384593797

RECEIVED

MAR 28 2022

03/29/22--01002--001 **25.00

2022 MAR 28 AM 7:51
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

© SIMMONS

APR 05 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LAKESHORE HANG GLIDING, 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:

GREGG LUDWIG

(Contact Person)

LAKESHORE HANG GLIDING, LLC

(Firm/Company)

17412 EAST RD

(Address)

UMATILLA, FL 32784

(City/State and Zip Code)

For further information concerning this matter, please call:

GREGG LUDWIG

at (352) 789-2987

(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

2022 MAR 28 AM 7: 51

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: LAKESHORE HANG GLIDING

2. The Florida document/registration number assigned to this limited liability company is:
L22000050349

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/21/2022

4. I, KIMBERLY A LUDWIG, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGER
(Print Title)

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

Kimberly A Ludwig
Signature of Dissociating Member or Resigning Manager

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