L22000103622

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
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JETA OF CARTER A. 28

COVER LETTER

TO:	Registration Section Division of Corporations	•	•
	MORE BETTER HOMES LLC		
SUBJ	ECT:	5 11:12:0	
	(Name of Lim	ited Liability Co	ompany)
The en	nclosed member, resignation or dissoci	ation and fee((s) are submitted for filing.
Please	e return all correspondence concerning	this matter to	:
Kimbe	rly Sandling		
	(Contact Person)		_
	(Firm/Company)		_
203 Br	own Road		
	(Address)		
Pensac	rola, FL 32507		
	(City/State and Zip Code)		_
For fu	orther information concerning this matter	er, please call	:
Kimbe	rly Sandling	469 _ at (337-2673
	(Name of Contact Person)	(Area Cod	e & Daytime Telephone Number)
_	sed please find a check made payable t		=
□ \$2:	5 Filing Fee	□ \$55 Filin	ig Fee & Certified Copy
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303





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: MOR	E BETTER HOMES LLC
2. The Florida doce L22000105622	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: November 14, 2022
4. I. Sandra (Print N	hereby withdraw/resign as a large of Person Resigning)
AMBR	(Print Title)
	bility company and affirm the limited liability company has been notified of my
Kiralier Signature of Di	Sociating Member or Resigning Manager
Dig.actic of Di	
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)