٦)	Requestor's Name)	
(A	(ddress)	
(Address)		
(0	City/State/Zip/Phone #)
_	_	
PICK-UP	MAIT WAIT	MAIL
(E	Business Entity Name)
(Document Number)		
Certified Copies	Certificates of	f Status
Supplied Instructions to	a Filina Officae	
Special Instructions to	o Finng Officer.	

Office Use Only



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2022 OCT 25 AM II: 33

COVER LETTER

TO:	Registration Section		
	Division of Corporations		
SUBJ	Ballroom on the lake LLC		
	(Name of	f Limited Liability Co	mpanyi
The ei	nclosed member, resignation or dis	ssociation and fee(s) are submitted for filing.
Please	return all correspondence concert	ning this matter to:	
Phyllis	Ann Grant	* ,	*
	(Contact Person)		_
Ballroc	om on the take LLC		
	(Firm Company)		_
455 Br	iar Patch Lane		
	(Address)		_
Geneva	a, FL 32732		
-	(City State and Zip Code)		_
For fu	orther information concerning this	matter, please call	:
Phyllis	Ann Grant	321 at (276-2990
····	(Name of Contact Person)	(Area Cod	e & Daytime Telephone Number)
Enclo:	sed please find a check made paya	ible to the Florida	Department of State for:
	5 Filing Fee		
	Mailing Address:		Street Address:
Registration Section			Registration Section
	Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee	
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 81

Tallahassee, FL 32303





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)

	e limited liability company as it appears on the records of the Florida Departmen
2. The Florida doc 1.22000151570	cument/registration number assigned to this limited liability company is:
	ember/manager withdrew/resigned or will withdraw/resign is:
4. I. Patricia Bridget	Geiger, hereby withdraw/resign as a Name of Person Resigning)
(Print :	Name of Person Resigning)
Marketing VP	
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Wille.	Dissociating Member or Resigning Manager
Signature of D	Dissociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
•	\$30.00 (Ontional)