L22000163975

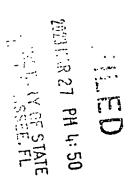
(Requestor's Name)
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12/21/22--01009--010 **25.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Landmark property investment group 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:
Tina Sydner (Contact Person)
Landmark Property Investment Groce (Firm/Company)
2505 Tuscaraact (Address)
West melbourne FC 32901 (City/State and Zip Code)
For further information concerning this matter, please call:
Tine Sydner $at (3a) 261-6471$ (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee S55 Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314



March 6, 2023

TINA SYDNOR 2505 TUSCARORA CT WEST MELBOURNE, FL 32904

SUBJECT: LANDMARK PROPERTY INVESTMENT GROUP LLC

Ref. Number: L22000163975

We have received your document for LANDMARK PROPERTY INVESTMENT GROUP LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form is to light and not acceptable for imaging purpose. I have enclosed a new form.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 823A00005219



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 lin	nited liability company as it appears on the records of the Florida Department
of State is: Lan	Mark Property Investment Group LLC
2. The Florida docum	ent/registration number assigned to this limited liability company is:
L22000 16	3 975
3. The date this memb	per/manager withdrew/resigned or will withdraw/resign is:
4. I. Scon (Print Nam	e of Person Resigning), hereby withdraw/resign as a
AMBR	int Title)
of this limited liabil resignation in writing	ity company and affirm the limited liability company has been notified of my ng.
Som	Low
Signature of Disso	ociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)