## L22000195884

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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## COVER LETTER

Division of Corporations	
Townsend Remodeling SUBJECT:	
	mited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Joseph Townsend	
(Contact Person)	
Townsend Remodeling	
(Firm/Company)	<del></del>
2409 1st Court SE	
(Address)	
Verp Beach, FL 32962	
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
Joseph Townsend	772 584-5364 at ( )
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable	•
■ \$25 Filing Fee	☐ \$55 Filing 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



## 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)

of State is: Florid	da	· · · · · · · · · · · · · · · · · · ·
2. The Florida doc 800386460248	ument/registration number a	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is: (04/25/2022
4, I. Brooke Townser	nd	, hereby withdraw/resign as a
	lame of Person Resigning)	
MGR		
	(Print Title)	
of this limited lia resignation in wr		ne limited liability company has been notified of n
Dungh	Loumsenoll	
Signature of D	issociating Member or Resig	ning Manager -
C		ining Wanager
Filing Fee:	\$25.00 (Required)	<u> </u>
•	\$30.00 (Negaried)	
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