h22000460260

(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

500399069175

12/19/22--01022--003   **25.00

2022 DEC 19 AM 10: 51

FILED

A. RIVERS

MAR - 6 2023

COVER LETTER

TO: Registration Section
Division of Corporations

Tyler's Landscape Solutions
SUBJECT: _____
(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:

Tyler Bott
_____
(Contact Person)

Tyler's Landscape Solutions
_____
(Firm/Company)

10130 Audrey Street
_____
(Address)

Port Charlotte, FL. 33981
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Tyler Bott   603   288-2126
_____ at (_____) _____
(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: **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 810
                                            Tallahassee, FL 32303

CR2E079 (2/14)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY
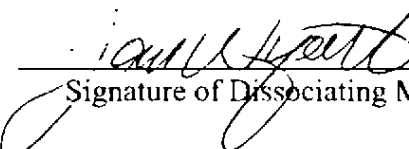
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Tyler's Landscape Solutions _____.

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

   L22000460260 _____.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/15/2022 _____

4. I, Jan Wyatt _____, 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.

_____

Signature of Dissociating Member or Resigning Manager

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