123000006776

| (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. | | | | | |
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Office Use Only



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COVER LETTER

| TO: | Regis | stration Section | | | | |
|--------|------------------------|---|------------------|---|--|--|
| | Divis | sion of Corporations | | | | |
| SUBJ | ECT: | PURPLE COW PROPERTY MANA | GEMENT LLC | | | |
| 50136 | 1,61. | (Name of Limited Liability Company) | | | | |
| The e | nclosed | d member, resignation or dissoc | iation and fee(| s) are submitted for filing. | | |
| Please | e return | all correspondence concerning | this matter to: | | | |
| Carole | Wright | | | | | |
| | | (Contact Person) | - | _ | | |
| Myers | & Wrig | ht PA | | | | |
| | | (Firm/Company) | | _ | | |
| 110 W | . Reyno | lds St., Ste 110 | | | | |
| | | (Address) | <u> </u> | _ | | |
| PLant | City. FL | . 33563 | | | | |
| | | (City/State and Zip Code) | | - | | |
| For fu | irther ii | nformation concerning this matt | er, please call: | | | |
| Carole | Wright | | 813 at (| 707-8838 | | |
| | (N | ame of Contact Person) | | e & Daytime Telephone Number) | | |
| | sed ple 5 Filin | ease find a check made payable i g Fee | | Department of State for: g Fee & Certified Copy | | |
| | Regis Divis P.O. | ng Address: stration Section sion of Corporations Box 6327 hassee, FL 32314 | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee FL 32303 | | |

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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 i | t appears on the records of th | ne Florida Department | |
|---|--------------------------------|---------------------------------|-----------------------|--|
| of State is: PURI | PLE COW PROPERTY MANAGEN | MENT LLC | · | |
| 2. The Florida doc L23000006776 | ument/registration number ass | igned to this limited liability | company is: | |
| 3. The date this me | ember/manager withdrew/resig | ned or will withdraw/resign | 07/18/2023 | |
| 4. I, | ame of Person Resigning) | , hereby withdraw/resign | as a | |
| Manager | wine of revision resigning) | | | |
| | (Print Title) | | | |
| of this limited lia resignation in wr | bility company and affirm the | limited liability company ha | s been notified of my | |
| resignation in wi | ining. | | 2023 | |
| //1 | -// | | 2023 JUL 24 | |
| Signature of Dissociating Member or Resigning Manager | | | | |
| | \$25.00 (Required) | | AM 11. | |
| Certified Copy: | \$30.00 (Optional) | | 2 | |