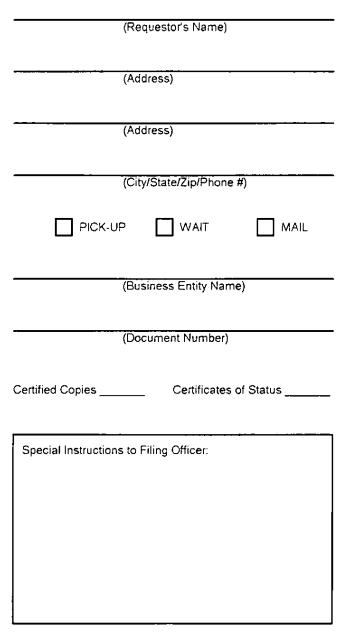
L23000023322







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COVER LETTER

TO: Registration Section Division of Corporations Just Hoses LLC 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: Katherine Naranjo (Contact Person) (Firm Company) 17 Pine Court Dr. (Address) Ocala, FL 34472 (City-State and Zip Code) For further information concerning this matter, please call: Katherine L Naranjo (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: **■** S25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 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 l	imited liability company a	is it appears on the records of the Florida Departmen
of State is: Just Ho	ses LLC	
2. The Florida docur 1.23000023322	ment/registration number a	assigned to this limited liability company is:
3. The date this men	nber/manager withdrew/re	signed or will withdraw/resign is: 8/10/2023
4. 1. Katherine L Naranjo (Print Name of Person Resigning)		
Managing Member		
(I	Print Title)	
of this limited liabi resignation in writ	· · · · · ·	he limited liability company has been notified of my
Katherin	e L. Naranji	
Signature of Dis	sociating Member or Resig	gning Manager
	\$25.00 (Required) \$30.00 (Optional)	.c. 2

Certified Copy:

\$30.00 (Optional)