623000117087

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	·
(110	u1033)	
	<u>.</u> -	
(Cit	y/State/Zip/Phone	e #)
D DIGITUD		
☐ PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(50	cument Hamber,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
,		
		ı

Office Use Only



700419806357

12.704/123--01021--019 **05.00

2023 DEC - 1, PA 12: 11

et 12/10/2023

COVER LETTER

TO: Registration Section Division of Corporations

C
ted Liability Company)
ation and fee(s) are submitted for filing.
this matter to:
er, please call:
407 394-6816 at ()
(Area Code & Daytime Telephone Number)
the Florida Department of State for: S55 Filing Fee & Certified Copy
Street Address:
Registration Section Division of Corporations

The Centre of Tallahassee

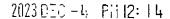
Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314





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	y as it appears on the records of the Florida Department
of State is: Fired	Up Land Solutions,LLC	
2. The Florida doc L23000117087	ument/registration numbe	er assigned to this limited liability company is:
3. The date this me	ember/manager withdrew	/resigned or will withdraw/resign is:
4. I, Kristen Schlusemeyer (Print Name of Person Resigning)		, hereby withdraw/resign as a
Title Mgr	, , ,	
	(Print Title)	'
of this limited lia resignation in wr		n the limited liability company has been notified of my
X Signature of D	issociating Nember or Re	esigning Manager
ingliature of D	issociating reprincer of re-	sonBurne ummer
	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	