(Requestor's Name)
(is quoted or items,
(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.
J DEMINS
AUG 1 3 2023

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07/21/23--01009--021 **25.00

COVER LETTER

Division of Corporations
SUBJECT: Flo-Grown Heating and Air, LLC. (Name of Limited Grability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Chad Turner (Contact Person)
Flo-Grown Heating and Air UC.
6720 OSWLAO DVIVE (Address)
MOUNT DORA FL 32757 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (407) 398-4122 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sum_{25}\$ Filing Fee & Certified Copy
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314

TO: Registration Section



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 cor	npany as it a	ppears on tl	ne records of th	e Florida Depa	artment
of State is: F	0-Grown	Hector	<u>ig arid</u>	Air, LL	<u>C.</u>	·
2. The Florida doc	ument/registration r	umber assign	ned to this l	imited liability	company is:	
L23(CO)	72416		<u></u> .			
3. The date this me	ember/manager with	drew/resigno	d or will w	ithdraw/resign	is: <u>lo - 1 - 2</u>	3_
4. 1, <u>Myayaa</u>	L HUStern Name of Person Resignin	<u>ncun</u>	_, hereby w	rithdraw/resign	as a	
MGR	(Manager	<u> </u>				
of this limited lia resignation in wr	bility company and iting.	affirm the lit	nited liabili	ty company ha	s been notified	of my
Miando	X Hooter	mai)			
Si ^l gnature of D	issociating Member	or Resigning	Manager			
_	\$25.00 (Require				2023	Į.
Certified Copy:	\$30.00 (Optional	ıl)			ت	z