Florida Department of Spate

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MACFARLANE FERGUSON & MCMULLEN (CLEARWATER)
Account Number : 071005001001 Attention Debi Favero

Phone : (727)441-8966 Fax Number : (727)442-8470

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: tim wo mower max. com

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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)

	e limited liability company a 8004 LLC	s it appears on the records of the Florida Department
2. The Florida doe L2300019234	_	ssigned to this limited liability company is:
3. The date this m	ember/manager withdrew/res	May 22, 2023 signed or will withdraw/resign is:
4. I, David E	i. Ward, III	, hereby withdraw/resign as a
(Print	Name of Person Resigning)	, hereby withdraw/resign as a
Мапад	er	
	(Print Title)	
resignation in w	· •	ne limited liability company has been notified of my
	near no an	
Filing Fee: Certified Conv	\$25.00 (Required) \$30.00 (Optional)	
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