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COVER LETTER

TO: Registration Section		
Division of Corporations		
subject: premier pools & leak detection lle		
	nited Liability C	Company)
The enclosed member, resignation or dissoc	iation and fee	e(s) are submitted for filing.
Please return all correspondence concerning	this matter to	o:
Robert Harris		
(Contact Person)		_
Premier Pools & leak Detection LLC		
(Firm/Company)		_
7012 Palm KeyAave		
(Address)		_
oldsmar, Florida 34677		
(City/State and Zip Code)		
For further information concerning this matt	ter, please cal	1:
Robert Harris	727 at (851-4410
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payable ☐ \$25 Filing Fee		ng Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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)

	limited liability company as it appears on the records of the Florida Deer Pools & Leak Detection LLC	epartment
2. The Florida docu 123000193227	ument/registration number assigned to this limited liability company is:	
4. L jennifer b lynch	mber/manager withdrew/resigned or will withdraw/resign is: , hereby withdraw/resign as a fame of Person Resigning)	r::11:12
manager	(Print Title) bility company and affirm the limited liability company has been notifi	ed of my
resignation in wr		ed of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	