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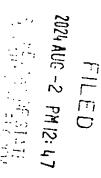
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer.					
		J. HORNE AUG 13 2024			

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	ECT: Prime IV (alm Beach Gardine of Limited Liability Comp	lens LLC	
The en	closed member, resignation	or dissociation and fee(s)	are submitted for filing.	
Please	return all correspondence co	ncerning this matter to:		
	Mark Wolon (Contact Person)			
<u> </u>	me D Palm B (Firm/Company)	each fardens L	LC	
112	90 legacy Avenu	L K 130		
D _C J	M Black for der (City/State and Zip ((s) FL 33410		
For fur	ther information concerning	this matter, please call:		
-M	(Name of Contact Person)	at (56) (Area Code &	708-454) R Daytime Telephone Number)	
	ed please find a check made -Filing Fee	• •	epartment of State for: Fee & Certified Copy	
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Î I	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303







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 as it a	ppears on the	records of the Florida Department
of State is:	rime IV (Palm Beach	Govidens	LLC
2. The Florida doc	ument/registratio	on number assign	ned to this lim	ited liability company is:
L230	0020873	2	_ -	
				draw/resign is: March 9, 2024
4. I, <u>Jlssiva</u> (Print N	Jame of Person Resig	gning)	_, hereby with	ndraw/resign as a
_	(Print Title)			
of this limited lial resignation in wr		nd affirm the lir	nited liability	company has been notified of my
	hin Mill ssociating Memb		Manager	<u> </u>
Filing Fee: Certified Copy:		,		
Continue Copy.	woo.oo (Optio	Oliai j		

J AND M HEALTH AND WELLNESS INC.

NOTICE OF RESIGNATION

The undersigned, Jessica Nolan, pursuant to Sections 607.0842(1) and 607.0807(1), Florida Statutes, hereby gives notice of my resignation as Secretary and Director of J and M Health and Wellness Inc., effective as of the date this Notice is executed below.

Executed this 9th day of March, 2024.

JESSICA NOLAN

[1070] 020726-23001

J AND M HEALTH AND WELLNESS INC.

ASSIGNMENT OF STOCK

FOR VALUE RECEIVED, the undersigned owner, Jessica Nolan, hereby transfers and assigns to Mark Nolan all of her shares of common stock in J and M Health and Wellness Inc., totaling 250 shares, standing in her name on the books of said corporation, represented by Certificate No. 002, and irrevocably constitutes and appoints Mark Nolan attorney to transfer the said stock on the books of the corporation, with full power of substitution in the premises.

Executed this day of March, 2024.

OWNER:

JESSICA NOLAN

[1072] 020726-23001