L23000379184

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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TÄLLAHÄSSEE FLORIDA

COVER LETTER

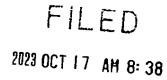
lings LLC
lame of Limited Liability Company)
or dissociation and fee(s) are submitted for filing.
oncerning this matter to:
H
·}
Code)
g this matter, please call:
at (321) 262-4140
(Area Code & Daytime Telephone Number)
e payable to the Florida Department of State for:
□ \$55 Filing Fee & Certified Copy

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



TALLAHASSEE, FLORIDA

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

The name of the limited liability company as it appears on the records of the Florida De of State is: McDonald Brothers Holdings LLC	
of State is: McDonald Brothers Holdings LLC	
2. The Florida document/registration number assigned to this limited liability company is:	
1.23000379184	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/01/23	
4. J. Lucian Randolph, hereby withdraw/resign as a	
(Print Name of Person Resigning)	
MGR - High Resolution Events LLC	
(Print Title)	
of this limited liability company and affirm the limited liability company has been notific resignation in writing.	ed of my
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	