L23000463188

(Requestor's Name)				
(Address)				
(Address)				
(Addless)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



300421010863

dissociation or resignation of member/manager

01/03/24--01014--006 **25.00



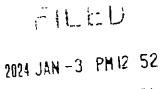
A. RAMSEY JAN 31,2024

COVER LETTER

TO: Reg	gistration Section		
Div	vision of Corporations		
SUBJECT	Precision Edge Landscaping LLC	-	
OCDULC!		Limited Liability Cor	mpany)
The enclos	sed member, resignation or dis-	sociation and fee(s	s) are submitted for filing.
Please retu	rn all correspondence concern	ing this matter to:	
Travis Haw	orth		
-	(Contact Person)	<u></u>	_
Precision Ec	lge Landscaping LLC		
	(Firm/Company)		_
360 S 8th A	ve		
	(Address)		_
Bartow, FL	33830		
	(City/State and Zip Code)		_
For further	r information concerning this r	natter, please call:	
Travis Haw	orth	863 at (282-4736
	(Name of Contact Person)		& Daytime Telephone Number)
Enclosed r	please find a check made payal	ole to the Florida I	Department of State for:
■ \$25 Fil	_		g Fee & Certified Copy
Ma	iling Address:		Street Address:
	gistration Section		Registration Section
	vision of Corporations D. Box 6327		Division of Corporations The Centre of Tallahassee
			2415 N. Monroe Street, Suite 810
Tallahassee, FL 32314			Tallahassee, FL 32303







ATT FORT

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

(Pursuant to 605.0216, Florida Statutes)

Prec	e limited liability company as it a ision Edge Landscaping LLC	ppears on the records of the Florida Department
2. The Florida doc L23000463188	cument/registration number assign	ned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigno	ed or will withdraw/resign is:
4. I,		
AMBR	,	
 :	(Print Title)	
of this limited lia resignation in w		mited liability company has been notified of my
Report Signature of D	Dissociating Member or Resigning	g Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	