

L24000100 210

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(Address)

(Address)

(City/State/Zip/Phone #)

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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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: CM Scapes, LLC

2. The Florida document/registration number assigned to this limited liability company is: 124000100210

3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 24, 2024

4. I, Mark Taylor, hereby withdraw/resign as a Member and Manager
(Print Name of Person Resigning)
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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