L 74000175327

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
	umils	
	Office Use Only	



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1024 APR 25 PH 12: 26



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 th	
4.150.1			은 유 교
of State is: 4JD I	Holdings, LLC		24 APR
2. The Florida docu	ment/registration number	assigned to this fimited liability	company is: 😽
L24000175322			. p
	- -	 ·	
3. The date this mer	mber/manager withdrew/re	esigned or will withdraw/resign	PH 12: 25
4. I. Debbie A Sm	iith	hereby withdraw/resign	ne n
· · · —	me of Person Resigning)	nereby withdrawresign	4.5 4.7
AMBR			
	Print Title)		
of this limited liab resignation in wri		the limited liability company ha	s been notified of my
Debbie A	Smith		
Signature of Dis	ssociating Member or Resi	igning Manager	
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		

COVER LETTER

TO:

CR2E079 (2/14)

Registration Section Division of Corporations

4JD Holdings, LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Kerstin Smith (Contact Person) 4JD Holdings, LLC (Firm/Company) 102 W Burleigh Blvd (Address) Tavares, FL 32778 (City/State and Zip Code) For further information concerning this matter, please call: Kerstin Smith at (352-431-7391 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for ☐ \$25 Filing Fee ☑ \$55 Filing Fee & Certified Copy Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303