M14 000 000 979

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

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
CUDIFICE. AC. D. C. LLC	
SUBJECT: Micron Devices LLC (Name of I	Limited Liability Company)
The enclosed member, resignation or diss	ociation and fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to:
Laura Perryman	
(Contact Person)	
	·
(Firm/Company)	
1521 Alton Road, Suite 417	
(Address)	
Miami Beach, FL 33139	
(City/State and Zip Code)	
For further information concerning this m	atter, please call:
Laura Perryman	at (480) 371-7991
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payabl	le 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 8

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



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 Departm	nent
of State is: Micron Devices LLC	
2. The Florida document/registration number assigned to this limited liability company is:	
<u>M14000000979</u>	
3. The date this member/manager withdrew/resigned or will withdraw/resign is: <u>Dec 30, 2020</u>	_
4. I, Laura Perryman , hereby withdraw/resign as a (Print Name of Person Resigning)	
Manager (Print Title) of this limited liability company and affirm the limited liability company has been notified of	my
resignation in writing.	
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	