M1600004945

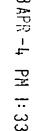
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 imig Smooth

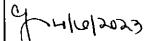
Office Use Only



000404963900

15 Th. 2- Opr 2--015 (**25.65





COVER LETTER

* TO: Registration Section Division of Corporations	
SUBJECT: GMG Properties & I	iability Company)
The enclosed member, resignation or dissociation	and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Cail Villanceus (Contact Person)	
GMG Properties & Investigation (Firm/Company)	ments, (((
638 3 porten burg flux # 70	<u> </u>
Hendersonulle NC 28792 (City/State and Zip Code)	<u> </u>
For further information concerning this matter, pl	ease call:
(Name of Contact Person) (321) 508-7432 Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the	Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

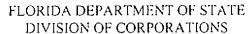
2415 N. Monroe Street, Suite 810

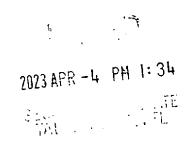
Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327







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:	MG Properties + Investments, LLC.
2. The Florida docu	ment/registration number assigned to this limited liability company is:
M16000	0004945
3. The date this mer	nber/manager withdrew/resigned or will withdraw/resign is: February 18, 202
4. I, <u>Ga, V</u> , (Print No.	hereby withdraw/resign as a me of Person Resigning)
· Managi	ng Member. Print Title)
of this limited liab resignation in wri	oility company and affirm the limited liability company has been notified of my ting.
Signature of Dis	Sociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)