## L13000022551

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(Address)
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JUN 1 : 26.5 J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 5RQ Judger S (Name of Limited Liability Con	npany)
The enclosed member, resignation or dissociation and fee(s	) are submitted for filing.
Please return all correspondence concerning this matter to:	
Contact Person)	- 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
SRQ Juldoars	記録に
(Firm/Company)  4020 Wordnew Dr  (Address)	RECEIVED 2018 JUNI 11 PM 12: 27
Surusota, FL 34232	27
(City/State and Zip Code)	<del>-</del>
For further information concerning this matter, please call:  (Name of Contact Person)  at (44)  (Area Code	780 3130 & Daytime Telephone Number)
Wready poid \$35 on 5/1918	Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



May 10, 2018

JAKE BROEN 4411 BEE RIDGE RD #289 SARASOTA, FL 34233

SUBJECT: SRQ OUTDOORS LLC

Ref. Number: L13000022551

We have received your document for SRQ OUTDOORS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

2016 JUNETT AN REGI

Letter Number: 018A00009747



## 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	e Florida Departm	ent
of State is:	SRQ Outdoors	LLC			<u> </u>
	ument/registration number assi	gned to this lin	nited liability	company is:	
3. The date this me	ember/manager withdrew/resign	ned or will with	ndraw/resign i	is: 1/1/14	/ >
4. I. Rya (Print A	A JASO  lame of Person Resigning)	, hereby wit	hdraw/resign	as a	
	6R (Print Title)				
	bility company and affirm the l	imited liability	company has	s been notified of	my
	/m				
<u> </u>	issociating Member or Resignii				
Filing Fee: Certified Copy:	\$25.00 (Required) \( \sqrt{1} \) \$30.00 (Optional)	Strendy	paid	01 5/10 01 11 15 JUNI	18
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