

L15000096851

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL 32310  
17 JAN -3 AM 8:01

**CARNEY LAW FIRM, P.A.**

ATTORNEYS AT LAW  
210 WEST SEVENTH STREET, SUITE 1  
MOUNTAIN HOME, ARKANSAS 72653

MARK D. CARNEY  
JODI G. CARNEY

TELEPHONE  
(870) 425-6354  
FAX NO.  
(870) 425-5451

December 28, 2016

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: FP & H, LLC


Dear Sir/Madam:

Enclosed please find a Cover Letter along with an original Dissociation of Resignation of Member for filing concerning the above noted matter. I have enclosed a check for the filing fee and a self-addressed stamped envelope in which to return a file-marked copy.

Thank you for your attention to this matter. If you have any questions or concern, please do not hesitate to contact our office.

Sincerely,

CARNEY LAW FIRM, P.A.

  
Mark D. Carney

MDC/kh  
Enclosures

17 JAN -3 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FP&H, LLC  
(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:

**MARK D. CARNEY**

(Contact Person)

**CARNEY LAW FIRM, P.A.**

(Firm/Company)

**210 W. 7TH STREET, SUITE 1**

(Address)

**MOUNTAIN HOME, AR 72653**

(City/State and Zip Code)

For further information concerning this matter, please call:

**MARK D. CARNEY**

**870 425-6354**

at ( )

(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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 JAN -3 AM 8:01



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: FP&H, LLC

2. The Florida document/registration number assigned to this limited liability company is: L15000096851

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/4/2016  
ALEJANDRO GOMEZ

4. I, ALEJANDRO GOMEZ, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
MEMBER  
*(Print Title)*

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

Alejandro Gomez F.

Signature of Dissociating Member or Resigning Manager

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



17 JAN -3 AM 8:01

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA