

L06000096415

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

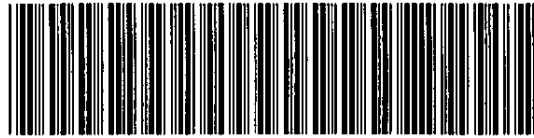
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

407A-63525

NRC

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Special Effects Decorating, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Albert L. Kelley

(Contact Person)

Albert L. Kelley, P.A.

(Firm/Company)

926 Truman Ave.

(Address)

Key West, FL 33040

(City/State and Zip Code)

For further information concerning this matter, please call:

Albert L. Kelley

(Name of Contact Person)

at ( 305 ) 296-0160

(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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Special Effects Decorating, LLC

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L06000096415

4. I, Laura B. Walker a/k/a  
Laura M. Bateman, hereby resign as a member and manager  
(Print Name of Person Resigning) (Print Title)

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

Laura M. Bateman

Signature of Resigning Member, Managing Member or Manager

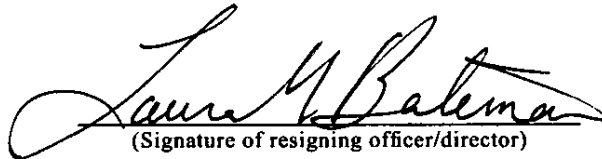
Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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## **OFFICER / DIRECTOR RESIGNATION**

I, Laura Bateman, hereby resign as Officer/Manager/Member of SPECIAL EFFECTS DECORATING, LLC, a limited liability company organized under the laws of the State of Florida and affirm that the company has been notified in writing of the resignation.

A handwritten signature in black ink that reads "Laura Bateman". The signature is fluid and cursive, with a long horizontal stroke at the end.

(Signature of resigning officer/director)