

LO7 000090617

(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:

Q. SILAS

JAN 12 2022

Office Use Only



000376731590

01/03/22--01004--027 \*\*25.00

FILED  
2022 JAN -3 AM 11:12  
SECRETARY OF STATE  
PAI

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Halfback Holdings 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:

Jack L. Epter

(Contact Person)

Halfback Holdings

(Firm/Company)

16286 Mellen Lane

(Address)

Jupiter Florida 33478

(City/State and Zip Code)

For further information concerning this matter, please call:

Jack L Epter

561

379-7830

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

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED

2021 JAN -3 AM 11:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Halfback Holdings LC

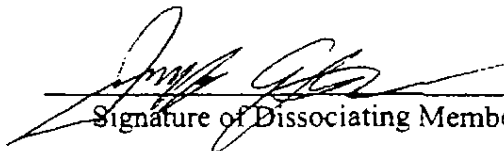
2. The Florida document/registration number assigned to this limited liability company is:  
L07000090617

3. The date this member/manager withdrew/resigned or will withdraw/resign is: November 1, 2021

4. I, Jeffrey Epter, hereby withdraw/resign as a  
(Print Name of Person Resigning)

D  
(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)