

LD9000004251

161

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

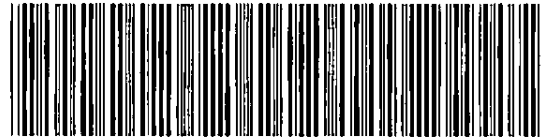
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200437304392

09/30/24--01013--003 **25.00

2024 SEP 30 PM 5:20
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BOB HANLEY 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:

ARCHIE LEE COLLUM JR
(Contact Person)

(Firm/Company)

6037 N AIRPORT RD
(Address)

MILTON FL 32583
(City/State and Zip Code)

For further information concerning this matter, please call:

ARCHIE LEE COLLUM JR at (850) 982-2367
(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

**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: BOB HANLEY LLC
2. The Florida document/registration number assigned to this limited liability company is:
LD900000 4251
3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 1, 2023
4. I, ARCHIE LEE COLLUM JR, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGR
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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

2024 SEP 30 PM 5:20
UNCLASSIFIED