# L10000042300

(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



800274844948

07/29/15--01008--023 \*\*20.00

07/13/15--01019--016 \*\*35.00

15 JUL 28 PM 12: 21
SECRETARY OF STATE

#### **COVER LETTER**

TO: Registration Section

	Division of Corporations		
	SUBJECT: Botting Plant of Mame of Limited Liability	Yami LLC y Company)	
	The enclosed member, resignation or dissociation and fee(s) are submitted for filing.		
	Please return all correspondence concerning this matte	r to:	
	Robbin McCovl (Contact Person)	<del></del>	
	(Firm/Company)	<del></del>	
	1201 Loblolly (t. (Address)	<del></del>	
	OFallon IL 62269 (City/State and Zip Code)		
	For further information concerning this matter, please	call:	
	Aramina MCCol at (Area (Area	Code & Daytime Telephone Number)	
Paym	Enclosed please find a check made payable to the Flore \$25 Filing Fee \$555 lend of \$3500 has been made. Addit	Print Proportional Control	Cortified
1	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	wyy.
	CR2E079 (2/14)		

TO: FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS** 

SUBJECT: BOTTLING PLANT OF MIAMI LLC

REF NUMBER: L10000042300

I SENT AN INCORRECT FORM FOR BOTTLING PLANT OF MIAMI LLC.

THIS IS THE CORRECT FORM.

PAYMENT OF \$35.00 ON PREVIOUS FORMS HAVE CLEARED BANK.

ATTACHED IS AN ADDITION FEE OF \$ 20.00 FOR A CERTIFIED COPY.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT

ARAMINA MCCOOL 770-265-8082

An molal

THANK YOU



RECEIVED

15 JUL 28 PH 3: 22

## FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE STATE SECRETARY OF STATE STATE SECRETARY OF STATE STATE SECRETARY OF SECRETARY OF STATE SECRETARY OF SECR

July 20, 2015

ROBBIN G MCCOOL 1201 LOBLOLLY CT O FALLON, IL 62269

SUBJECT: BOTTLING PLANT OF MIAMI LLC

Ref. Number: L10000042300

We have received your document for BOTTLING PLANT OF MIAMI 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 LIMITED LIABILITY COMPANY. 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.

Tammy Hampton Regulatory Specialist III

Letter Number: 515A00015152



### 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)

1 775	
	t appears on the records of the Florida Department
of State is: Bottling Plant	of Miani LLC
2. The Florida document/registration number ass	igned to this limited liability company is:
L10000042300	·
3. The date this member/manager withdrew/resig	gned or will withdraw/resign is: 7eb. 9 2015
Q 11 50 6 6 1	, hereby withdraw/resign as a
Print Title)	
of this limited liability company and affirm the resignation in writing.	limited liability company has been notified of my
IM Gmill	JUL 28 CRETARY LAHASS
Signature of Dissociating Member or Resign	
Filing Fee: \$25.00 (Required)  Certified Copy: \$30.00 (Optional)	Certified Copy Attacked. 2  Previous check for \$3500 has
	Previous check for \$3500 has
	been paid.