

L10000053269

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

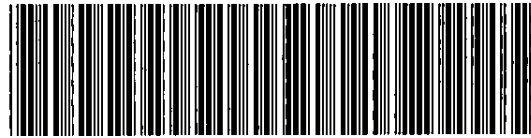
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G. MCLEOD

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EXAMINER



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11/29/10--01028--012 **25.00

FILED
10 NOV 29 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GWEN D. BLOOM, P.A.

GWEN D. BLOOM
ATTORNEY AT LAW
ADMITTED IN FLORIDA & MASSACHUSETTS

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November 22, 2010

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

Re: Philly Italian Ice, LLC
Document No. L10000053269

Dear Sir or Madam:

In connection with the above-referenced limited liability company, enclosed please find a completed Resignation of Member/Manager, and a check in the amount of \$25.00 for the filing fee.

If you have any questions, please contact this office directly.

Cordially yours,



Gwen D. Bloom

GDB:erp
Enclosures.
cc: Richard Karnow, Manager

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Philly Italian Ice, 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:

Richard Karnow

(Contact Person)

Philly Italian Ice, LLC

(Firm/Company)

1404 Devonshire Ct.

(Address)

Altamonte Springs, FL 32714

(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Karnow

(Name of Contact Person)

at (407) 967-9001

(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: Philly Italian Ice, 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:
L10000053269

4. I, Arianne Archer, hereby resign as a Manager and Member
(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.



Signature of Resigning Member, Managing Member or Manager

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

FILED
10 NOV 29 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA