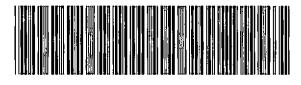
L10000081919

(Requestor's Name)
(Address)
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, , , ,
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COVER LETTER

TO: Registration Section Division of Corporations	•			
Country Feed & General Sto SUBJECT:	re LLC			
(Name of Limited Liability Company)				
The enclosed member, resignation or	dissociation and fee(s) are submitted for filing.			
Please return all correspondence conc	erning this matter to:			
Ernest Cremer				
(Contact Person)	· ·			
Country Feed & General Store LLC				
(Firm/Company)				
2508 Reid Street				
(Address)				
Palatka, FL 32177				
(City/State and Zip Cod	с)			
For further information concerning th	is matter, please call:			
Ernest Cremer	386 325-7326 at ()			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed please find a check made pa	yable to the Florida Department of State for:			
☐ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy			
Mailing Address:	Street Address:			
Registration Section	Registration Section			
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			
1 4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tallahassee, FL 32303			

CR2E079 (2/14)



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 th	e Florida	Depar	tment
of State is: Coun	try Feed & General Store LLC				<u></u> -
2. The Florida doc L10000081919	ument/registration number as	ssigned to this limited liability	company	.s: 2021	
Jennifor F. Pinki	ne	igned or will withdraw/resign)弱2 	
	Manager (Print Title)	, hereby withdraw/resign	as a	PH 1: 08	e english Tampa
	bility company and affirm th	e limited liability company ha	s been no	tified (of my
Signature of D	refor Tisken issociating Member or Resign	ning Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				