# L11000130272

(Re	questor's Name)	· · · · · · · ·
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies		of Status
Special Instructions to Filing Officer:		

Office Use Only



800296408048

03/10/17--01011--005 \*\*35.00

17 AFR -4 MII: 24

J. HARRIS

#### **COVER LETTER**

TO: Registration Section
Division of Corporations
SUBJECT: Muy phys Pub LLC (Name of Limited Liability Company)
(. tame abbitined blacking company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
David Gillespie (Contact Person)
Murphys Rob LLC (Firm/Company)
6582 International Drive
Orlando Fl. 32821 (City/State and Zip Code)
For further information concerning this matter, please call:
David Gillespie at (336) Zyo 37-Zko (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\Begin{align*} \text{\$\text{\$\text{\$\$}}} \text{\$\text{\$\$}\$} \t

#### 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

CR2E079 (2/14)

## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2017

DAVID GILLESPIE 6582 INTERNATIONAL DRIVE ORLANDO, FL 32819

SUBJECT: MURPHY'S PUB LLC Ref. Number: L11000130272

2017 APR -4 PM 2: 12

We have received your document for MURPHY'S PUB LLC and your check(s) totaling \$. 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 LLC. 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 117A00005112

17 APR -4 MII: 21



### 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 recor	ds of the Florida Department
of State is:	Turphys Pub LLC	·
2. The Florida docu	ument/registration number assigned to this limited l	iability company is:
L11000	130272	
3. The date this me	mber/manager withdrew/resigned or will withdraw.	/resign is: <u>03/01/201</u> 7
	LLE HEALY, hereby withdraw (ame of Person Resigning)	//resign as a
MANK	GER (Print Title)	
of this limited lia resignation in wr	bility company and affirm the limited liability compiting.	oany has been notified of my
Much	lle Meals	
Signature of D	ssociating Member or Resigning Manager	7 APR-4
Filing Fee:	\$25.00 (Required)	
Certified Conv.	\$30.00 (Ontional)	