

L120000041SS1

(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



400299972654

400299972654
05/30/17--01017--035 **25.00

FILED
17 AUG -3 PM 4: 26
OFFICE OF STATE
CLERK, FLORIDA

S. WARREN

AUG 07 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2017

JOHN J. CRONE III
LIVE OAK LAW, PLLC
1060 WOODCOCK ROAD
ORLANDO, FL 32803

SUBJECT: FFPINSPECT, LLC
Ref. Number: L12000041551

We have received your document for FFPINSPECT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a GENERAL PARTNERSHIP - GP, but your entity is a LIMITED LIABILITY COMPANY - 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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 317A00011663

GP

(For Office Use Only)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **FFP Inspect, LLC d/b/a Elite Analysis**

(Name of Partnership)

DOCUMENT NUMBER: **L12000041551**

The enclosed Statement of Dissociation for Partnership and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John J. Crone III (for Curtis Kloc)

(Name of Person)

Live Oak Law, PLLC

(Firm/Company)

1060 Woodcock Road

(Address)

Orlando, FL 32803

(City/State and Zip Code)

For further information concerning this matter, please call:

John Crone

(Name of Person)

at (**321**) **765-9109**

(Area Code & Daytime Telephone Number)

STREET 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

**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: FFP Impact LLC d/b/a Elite Analysis

2. The Florida document/registration number assigned to this limited liability company is:

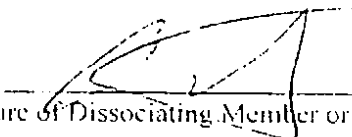
L1200041551

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 24, 2017

4. I, Curtis Klee, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager
(Print Title)

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


Signature of Dissociating Member or Resigning Manager

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

FILED
17 AUG -3 PM 4:26
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE