

L12000117103

(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



300242178273

11/30/12--01002--023 **25.00

FILED
2012 NOV 30 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC - 3 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Four Hands Fine Furniture Consignment 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:

Michael P Wood

(Contact Person)

Four Hands Fine Furniture Consignment LLC

(Firm/Company)

15271 McGregor Blvd, Suite 8

(Address)

Fort Myers FL 33908

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael P Wood

(Name of Contact Person)

at (**239**) **245-7524**

(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

FILED
2012 NOV 30 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2012 NOV 30 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: Four Hands Fine Furniture Consignment 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:
L12000117103

4. I, Jose L Popoca, hereby resign as a MGR
(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)

State of FLORIDA
County of LEE
On this 14th day of NOVEMBER 2012
before me personally appeared
JOSE L POPOCA
to me known to be the person who executed the
foregoing instrument, and acknowledged that he
executed the same as his free act and deed.
SEAL (signed Sandra G. Doubles)
NOTARY PUBLIC

CR2E079 (5/06)

