

L13000023735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

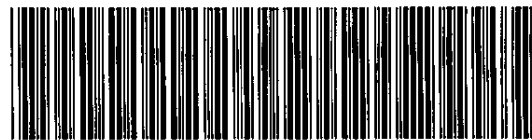
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 AUG 21 PM 3:54  
2014 AUG 21 PM 3:54  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

*mgm Resignation*

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Harper's Custom Tile + Wood Flooring "LLC"  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

James Harper  
(Contact Person)

Harper's Custom Tile + wood flooring  
(Firm/Company)

11951 Prince Charles Ct Cape Coral FL  
(Address)

33991  
(City/State and Zip Code)

For further information concerning this matter, please call:

James Harper at (239) 440-3049  
(Name of Contact Person) (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

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14 AUG 21 PM 3:54  
TALLAHASSEE, FL  
-102-1000-1-1



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: Harper's Custom ~~Floor~~ tile + Wood Flooring.

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

L13000023735.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/1/14

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

MGRM  
(Print Title)

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

Laura Harper  
Signature of Dissociating Member or Resigning Manager

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