13000036651

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(Address)		
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COVER LETTER

_	ntion Section n of Corporations		
SUBJECT: _	Seven Thirty One (Name of Limited Liability Con	Mpany)	
The enclosed n	nember, resignation or dissociation and fee(s) are submitted for filing.	
Please return a	Il correspondence concerning this matter to:		
Am	Y O'L = AR Y (Contact Person)	_	
Sev	en Thirty-One LLC (Firm/Company)	<u>1</u>	
302	5 44th AVE No (Address)		
<u>ST.</u>	PETERSBURG FL 337 (City/State and Zip Code)	14	
For further info	ormation concerning this matter, please call:))
<u>A 713 '4</u> (Nan	ne of Contact Person) at (727)	234-235-8 c & Daytime Telephone Number)	7. 22
Enclosed pleas [2] \$25 Filing I	e find a check made payable to the Florida l Fee \$55 Filin	Department of State for: g Fee & Certified Copy	63.41
Registr Divisio P.O. Bo	Address: ation Section n of Corporations ox 6327 ssee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	o



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:	even Therty-One LXC.	
	ment/registration number assigned to this limited liab	
L 13000	0036681	
3. The date this me	mber/manager withdrew/resigned or will withdraw/res	sign is: <u>06/30/202</u> 2
4.1, LINDA	S. ALBRECHT , hereby withdraw/re	esign as a
(Print N	ame of Person Resigning)	1.7
me.	Sm.	r∗ . C
	Print Title)	· · ·
	pility company and affirm the limited liability compan	50 60
of this limited liab	oility company and affirm the limited liability compan	y has been notified of my
resignation in wri	ting.	•
<i></i>		e-maret e -
Lenda	S. albrecht	
Signature of Di	ssociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	
	\$30.00 (Ontional)	