13000060089

(Re	questor's Name)	
(Ad	dress)	
,	,	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
	_	_
(Bu	siness Entity Na	me)
(Dc	cument Number	<u> </u>
		,
Certified Copies	_ Certificate	s of Status
Consist Instructions to	Filing Officer	
Special Instructions to	riling Onicer.	
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Office Use Only



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OCT 4 2022 S. PRATHE!

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Awthony's Auto Don (Name of Limited Liab	ne LLC ility Company)
The enclosed member, resignation or dissociation ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning this ma	tter to:
ANTONIO COLON (Contact Person)	
ANthony's Auto Dome	<u> </u>
10410 Sw 185 TER (Address)	
Cuffey BAY FLORIDA (City/State and Zip Code)	33.157
For further information concerning this matter, pleas	se call:
Antonio Colon at (at (205) 342 6838 ca Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Fl ☐ \$25 Filing Fee ☐ \$5	orida Department of State for: 5 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



September 20, 2022

ANTHONY'S AUTO DOME LLC 10410 SW 185 TER CUTLER BAY, FL 33157

SUBJECT: ANTHONY'S AUTO DOME LLC

Ref. Number: L13000060089

We have received your document for ANTHONY'S AUTO DOME LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA 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) 245-6939.

Letter Number: 022A00020903

Stacy Prather Regulatory Specialist III

www.sunbiz.org



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	e records of the Florida Department
of State is:	Anthony's Auto Do	ne LLC
2. The Florida doc	ument/registration number assigned to this lir	mited liability company is:
1130	00060089	
3. The date this mo	ember/manager withdrew/resigned or will wit	hdraw/resign is: <u>10-03-2</u> /
4. I. ANT (Print 8	Vane of Person Resigning), hereby wi	thdraw/resign as a
_TREA	SURFR (Print Title)	
of this limited lia resignation in wr	ability company and affirm the limited liability riting.	y company has been notified of my
Signature of D	issociating Member or Resigning Manager	2022 [ALL
<u> </u>	\$25.00 (Required) \$30.00 (Optional)	2 SEP 30 A