L13000063710

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Registration Section Division of Corporations

CHECKE

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

SUBJECT: TAULK WHITEHEAD FEOORIN	······································
(Name of Li	mited Liability Company)
The enclosed member, resignation or disso	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
MICKEY C RUDD JR	
(Contact Person)	
PAUL R WHITEHEAD FLOORING AND DESIGN	N. LLC
(Firm/Company)	
P13 RIVER RAPIDS AVE	
(Address)	
BRANDON, FL 33511	
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
MICKEY C RUDD JR	at (321) 354-5124
(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
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

Tallahassee, FL 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: PAUI	R WHITEHEAD FLOORINGA	AND DESIGN, LLC			
2. The Florida doci	ument/registration number a	ssigned to this limited liab	bility company is:		
1.13000063770					
3. The date this me	mber/manager withdrew/res	igned or will withdraw/re	esign is: 12/31/22		
4. I, MICKEY C RUDD JR		, hereby withdraw/re	_, hereby withdraw/resign as a		
(Print N	ame of Person Resigning)	·			
MANAGING ME	MBER & VP				
	(Print Title)				
of this limited lia resignation in wr	bility company and affirm thiting.	ne limited liability compar	ny has been notifi <u>ed</u> of my		
Mohr	issociating Member or Resig				
Signature of Di	issociating Member or Resig	ning Manager	22. 23		
Filing Fee:	\$25.00 (Required)				
	\$30.00 (Optional)		1 de la companya de l		