

L130000 117 297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*PH.*  
9-10-14

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cottage Cone Cellars  
(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:

Karen J. Gregory  
(Contact Person)

Cottage Cone Cellars, LLC  
(Firm/Company)

3535 US Hwy 17#14  
(Address)

Fleming Island FL 32003  
(City/State and Zip Code)

For further information concerning this matter, please call:

Karen J. Gregory at 512-573-8817  
(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

FILED  
14 SEP -2 AM 10:30  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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14 SEP -2 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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: Cottage Core Collars LLC

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

L13000117297

3. The date this member/manager, withdrew/resigned or will withdraw/resign is: 8/31/14

4. I, Jennifer Ennis, hereby withdraw/resign as a

(Print Name of Person Resigning)

Managing Member  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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