

L14000010544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

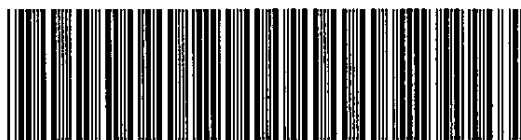
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 DEC 18 AM 9:46

C.L.
12-24-14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Feed Em Well, 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:

Sean W. Kelley

(Contact Person)

Kelley & Kelley, P.L.

(Firm/Company)

43 Cincinnati Ave.

(Address)

St. Augustine, FL 32084

(City/State and Zip Code)

For further information concerning this matter, please call:

Sean Kelley

at (904) 819-9706

(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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 DEC 18 AM 9:46

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: Feed em well, LLC

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

214000016544

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/15/2014

4. I, WYNDALE P. YANCY, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager
(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)