

L14000156873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

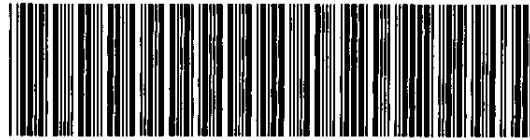
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 JAN 25 PM 4: 07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

FE30 2 2015  
T. L. GARNER  
*mlm*

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Montauk Fish House 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:

Richard Flanigan  
(Contact Person)

Montauk Fish House  
(Firm/Company)

4258 Sun Village Ct.  
(Address)

New Smyrna Beach FL 32169  
(City/State and Zip Code)

For further information concerning this matter, please call:

Richard Flanigan at (386) 690-3647  
(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



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: Montauk Fish House LLC

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

L14000156873

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1-15-2015

4. I, Richard Flanigan, hereby withdraw/resign as a  
(Print Name of Person Resigning)

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)

15 JAN 25 PM 4: 07  
RECEIVED  
AND  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Gretchen Skoglund

