

L15000050570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

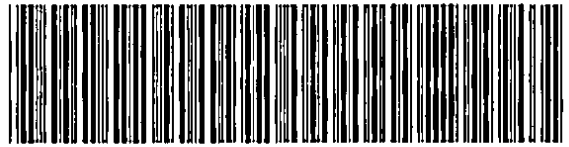
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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O SIMMONS

FEB 08 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Splash Brothers, 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:

Dominic Seta

(Contact Person)

(Firm/Company)

785 N.E. 36th Street

(Address)

Boca Raton, Florida 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Dominic Seta

(Name of Contact Person)

561 212-1262
at (_____) _____
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

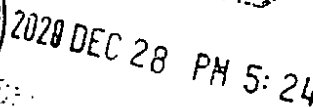
☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



九班

(Pursuant to 605.0216, Florida Statutes)

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



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