15000160503

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filina Officer:	
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COVER LETTER

Division of Corporations	
SUBJECT: Father and Sons (Name of Limit	FISHCRICS, LLC ed Liability Company)
The enclosed member, resignation or dissociate	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	nis matter to:
Richard McPhillips (Contact Person)	
(Firm/Company)	
2014 Tamiami Trail N #503	3
(Address)	A
Napies, FL 34103 (City/State and Zip Code)	AND
(City/State and Zip Code)	
For further information concerning this matter	. please call: 11 (305) 910-8005
Richard Millips	111 305 1 914-8045 \$. 8.
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: S55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



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)

	10(11(0.	and	<u>svns</u>	Fisheries, 1	<u> </u>	
2. The Florida	document/regi	stration num	nber assig	ned to this limited	liability compa	ny is:
L1500	0140503		· · · - · · · · · · · · · · · · · · · ·			
3. The date this	member/man	ager withdre	rw/resign	ed or will withdraw	/resign is:	
i.i. Richau	rd Miph	illips T	I	, hereby withdray	v/resign asta	وخن
(l'r	int Name of Pers	on Resigning)	 .			NON LIES
manag	Print Title)	nber	·		HAS	NO.
of this limited resignation in	l liability com	pany and aff	irm the li	mited liability com	pany has been i	noti tied of
)	mited liability com	Ric	. w
	Jos	24		2	>	
Signature o	f Dissociating	Member of	Resignifi	g Manager		