L15000161702

(Dawledted News)	
(Requestor's Name)	
(Address)	
(7.00.000)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
	 -
(Business Entity Name)	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Sta	tus
Special Instructions to Filing Officer:	
•	
	[
املاتم	
Ψ	

Office Use Only



200285481862

08/02/16--01013--003 **25.00

ALL AHASSES, I I DRIVE

JUL 11 PH 4:37 16 AUG -2 PH 1

AUG 0 4 2016 S. YOUNG





FLORIDA DEPARTMENT OF STATE Division of Corporations

July 13, 2016

NORMAN A CARDINALE 3420 BAL HARBOR BLVD PUNTA GORDA, FL 33950

SUBJECT: PICASSO KITCHEN AND BATHS LLC

Ref. Number: L15000161702

We have received your document for PICASSO KITCHEN AND BATHS LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 416A00014612

TALLAHASSI ET LSAID

COVER LETTER

TO: Registration Section Division of Corporations

Picasso Kitchen and Baths LLC		
SUBJECT: (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:		
Norman A Cardinale		
(Contact Person)		
Picasso Kitchen and Baths LLC	16	SEC
(Firm/Company)	AUG	AA T
3420 Bal Harbor Blvd	-2	SSEE
(Address)	PM	
Punta Gorda, FL 33950	1: 45	
(City/State and Zip Code)		
For further information concerning this matter, please call:	•	
Nina Blair 914 786.1399		
(Name of Contact Person) at () (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\begin{align*} \begin{align*} align		

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

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)

Pica	limited liability company as sso Kitchen and Baths LLC		Florida Depa	artment
	ument/registration number as:	signed to this limited liability co	ompany is:	SECRETARY FALLAHASS
Norman A Ca	ardinale	gned or will withdraw/resign is:, hereby withdraw/resign as	July 8, 20	16 E. FLORIDA
		e limited liability company has l	been notified	l of my
Signature of Di	ssociating Member or Resign	ning Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			