

L15000162182

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

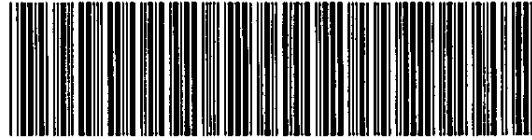
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2017 FEB - 8 A 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

S Warren

FEB 09 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2017

VALERIE BARNHART, ESQ.
8201 PETERS ROAD #4000
PLANTATION, FL 33324

SUBJECT: TC FLORAL, LLC
Ref. Number: L15000162182

We have received your document for TC FLORAL, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE CHOOSE ACTION DESIRED BY INDICATING ONE OF THE OPTIONS LISTED AS FIFTH - EITHER THE STATEMENT IS CANCELLED OR AMENDED.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 017A00001691

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TC FLORAL, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Valerie Barnhart, Esq.

Name of Person

Kelley Kronenberg, P.A.

Firm/Company

8201 Peters Road #4000

Address

Plantation, FL 33324

City/State and Zip Code

vbarnhart@kklaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Valerie Barnhart

at (954)

370-9970

Name of Person

Area Code

Daytime Telephone Number

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

AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

FIRST: The name of the limited liability company is: TC FLORAL, LLC

SECOND: The Florida Document number of the limited liability company is: L15000162182

THIRD: The street address of the limited liability company's principal office is:

1525 NW 82nd Avenue

DORAL, FL 33126

The mailing address of the limited liability company's principal office is:

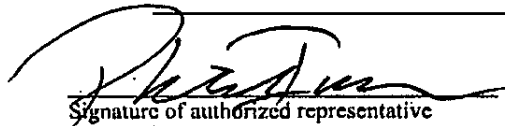
P.O. BOX 348418 MIAMI, FL 33234

FOURTH: The date the statement of authority became effective is: 10/23/2015

FIFTH: The statement of authority is cancelled.

OR

The amendment to the statement of authority is


Signature of authorized representative

Phil Ivey

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

CR2E145 (2/14)

FILED
2011 FEB - 8 A 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA