## LITOUOSHAGY

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to WIORS FOLK				

Office Use Only



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04/20/17--01027--017, \*\*85.00

TALLANASSEE FLORII

**S Warren** MAY - 5 2017



April 21, 2017

PHILLIP FUDGE 10306 PLEASANT VIEW DR LEESBURG, FL 34788

SUBJECT: PT ENGINEERED PRODUCTS LLC

Ref. Number: L17000054694

We have received your document for PT ENGINEERED PRODUCTS LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a RESIGNATION OF REGISTERED AGENT, but your entity is a RESIGNATION OF MANAGER/MEMBER. Please complete and return the enclosed blank form(s).

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.

Letter Number: 217A00007816

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Registration Section Division of Corporations

TO:

CR2E079 (2/14)

SUBJECT: PT ENGINEERED PRODUCTS LL					
(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:					
Phillip Fudge (Contact Person)					
•					
(Firm/Company)					
LEESburg, FL 34788					
LEESburg, FL 34788  (City/State and Zip Code)					
For further information concerning this matter, please call:					
Phillip Fudge at (352) 408-2983  (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 recor	ds of the Florida Department
of State is: P	T ENGINEERED	Products	LLC
2. The Florida doc	ument/registration number as	signed to this limited l	iability company is:
L1700	0054694		
3. The date this me	ember/manager withdrew/resi	gned or will withdraw	resign is: <u>April 15,</u> 2017
4. I, JAm. (Print N	es Fudge Jame of Person Resigning)	, hereby withdraw	r/resign as a .
MAN	AGER. (Print Title)	•	
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability comp	any has been notified of my
Dan	ns E Du	092	
Signature of D	issociating Member or Resign	ning Manager	•
Filing Fee:	` 1		
Certified Copy:	\$30.00 (Optional)		SECIII