

470000 64010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

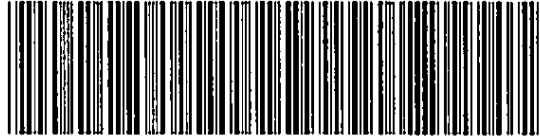
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/25/19--01021--002 **25.00

2019 FEB 25 PM 3:18
SECRETARY OF STATE
TALLAHASSEE FL 32303

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Classic Enterprises LLC
(Name of Limited Liability Company)

2019 FEB 25 PM 3:16
RECEIVED-TAKES
TALLAHASSEE FL 32314

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Rick Perry
(Contact Person)

Classic Enterprises LLC
(Firm/Company)

3444 Tucker Ave (mailing address is 3430 Tucker Ave)
(Address)

St Cloud FL 34772
(City/State and Zip Code)

For further information concerning this matter, please call:

Rick Perry at 407 709-5968
(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

2019 FEB 25 PM 3:19
RECEIVED
TALLAHASSEE, FLORIDA

**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 records of the Florida Department of State is: CLASSIC ENTERPRISES LLC

2. The Florida document/registration number assigned to this limited liability company is:

L17000064010

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1-1-19

4. 1. Darla Perry hereby withdraw/resign as a
(Print Name of Person Resigning)

VP
(Print Title)

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

Darla K Perry
Signature of Dissociating Member or Resigning Manager

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