

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	¥)
	MAIL
(Business Entity Name	>)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	
Office Use Only	]



09/14/18--01015--017 ++25.00



K. SALY SEP 1 8 2018

## COVER LETTER

TO: **Registration Section Division of Corporations** 

CORBELL ART + DESIGNI LLC SUBJECT: Name of Limited Liability

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

Please return all correspondence concerning this matter to:

CELINA PEARSON (Contact Person)

CORBELL ART + DESIGN LLC (Firm/Company)

1457 PARK ST (Address)

CLEARWATER FL. 33755 Wire/State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) at (<u>818</u>) 751 9436 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: 2\$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

CR2E079 (2/14)

#### MAILING ADDRESS:

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314



FILED 18 SEP 14 AM 7: 07 SECRETATE DE DIATE I ALLAHASSEE, FLORIDA

### 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 records of the Florida Department

of State is: CORBELL ART + DESIGN LLC

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

L17000166276

3. The date this member/manager withdrew/resigned or will withdraw/resign is:  $\frac{9/3}{2018}$ 

4.1. CHRistopher & CORBELL\_\_\_\_\_, hereby withdraw/resign as a (Print Name of Person Resigning)

MKT\_\_\_\_\_

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

, Cobel

Signature of Dissociating Member or Resigning Manager

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