

L17000172336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

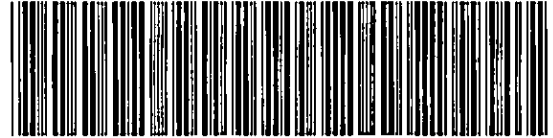
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/13/21--01009--022 \*\*525.00

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SECRETARY OF STATE  
TALLAHASSEE, FL

*Dissociation  
of member*

NOV 08 2021

D CUSHING

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 2 FLAMINGO HAMMOCK PROPERTY, LLC.  
(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:

MYHANH LOUDEN

(Contact Person)

2 FLAMINGO HAMMOCK PROPERTY, LLC.  
(Firm/Company)

500 S FEDERAL HWY, #1641

(Address)

HALLANDALE, FL 33008

(City/State and Zip Code)

For further information concerning this matter, please call:

MYHANH LOUDEN

3055150135

at ( )

(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

PAID

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 25, 2021

MYHANH LOUDEN  
500 S. FEDERAL HWY  
# 1641  
HALLANDALE, FL 33008

SUBJECT: 2 FLAMINGO HAMMOCK PROPERTY LLC  
Ref. Number: L17000172336

We have received your document for 2 FLAMINGO HAMMOCK PROPERTY LLC and your check(s) totaling \$525.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ENTITY WAS VOLUNTARILY DISSOLVED 09/25/2021. ENTITY MUST BE ACTIVE TO FILE AMENDMENT.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers  
Regulatory Specialist II

Letter Number: 721A00025889



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: 2 FLAMINGO HAMMOCK PROPERTY, LLC.

2. The Florida document/registration number assigned to this limited liability company is: L 17 000 172 336

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/1/2021

4. I, MYHANH LOUDEN, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AUTHORIZED REPRESENTATIVE

(Print Title)

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

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS