

L17000184435

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

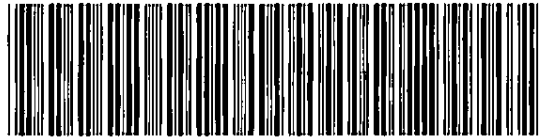
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/10/20--01015--010 **55.00

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2020 FEB 10 PM 5:18
STPAUL, MN 55101

Resignation/cc

MAR 04 2020
I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

Lewis & Richards Painting LLC

SUBJECT: _____
(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:

Scott Richards

(Contact Person)

(Firm/Company)

4337 Whispering Woods Place

(Address)

Sarasota, FL 34233

(City/State and Zip Code)

For further information concerning this matter, please call:

Scott Richards

941

822-5463

(Name of Contact Person)

at (_____) _____
(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

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



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
2020 FEB 10 PM 5:18
SEAL OF THE STATE OF FLORIDA
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
Lewis & Richards Painting LLC
of State is: _____.

2. The Florida document/registration number assigned to this limited liability company is:
L17000184435
_____.

January 21, 2020

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

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

AMBR
(Print Title)

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

Scott Richards

Signature of Dissociating Member or Resigning Manager

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