L17000249603

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to 1 ming officer.

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Choate Holdings LLC (Name of Limited Liability)	
(Name of Limited Liability)	Company)
The enclosed member, resignation or dissociation and fe	ee(s) are submitted for filing.
Please return all correspondence concerning this matter	to:
James Choate	
(Contact Person)	
Choate Holdings LLC	
(Fim/Company)	
PO Box 2995	
(Address)	
Arcadia, Florida 34265	
(City/State and Zip Code)	
For further information concerning this matter, please ca	all:
James Choate 863	244-1370
(Name of Contact Person) (Area Co	244-1370)ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid	la Department of State for:
■ \$25 Filing Fee □ \$55 Fil	ling Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



FILED

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SECRETARY OF STATE TALLAHASSEE, FL

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)

	limited liability company as it appears on the records of the Florida Department e Holdings LLC
2. The Florida doc L17000249603	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
1. 1, Eugene Turner (Print N	, hereby withdraw/resign as a lame of Person Resigning)
Manager	
	(Print Title)
resignation in wr	bility company and affirm the limited liability company has been notified of my iting. Issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)