

LA000210263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

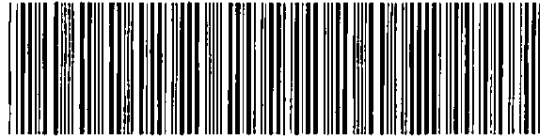
(Business Entity Name)

(Document Number)

Certificc Copies _____ Certificates of Status _____

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07/31/23--01037--019 **50.00

2023 JUL 31 AM 7:12

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SPERRY LAW FIRM

Bruce J. Sperry

Attorneys at Law
Ph 813.754.3030 | Fx 813.754.3928
1607 S. Alexander Street | Suite 101 | Plant City, Florida 33563-8421
www.sperrylaw-pc.com

Benjamin C. Sperry

July 25, 2023

VIA PRIORITY MAIL

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

RE: Professional Plumbing & Restoration LLC

Dear Sir or Madam:

Enclosed please find Resignation of Member, Manager from Florida Limited Liability Company form and Registered Agent/Registered Office Change form. Also, enclosed please find Sperry Law Firm check no. 1299 in the sum of \$50.00 representing the filing fees for the above referenced filings.

Sincerely,

SPERRY LAW FIRM

By: 

Benjamin C. Sperry

Enclosures

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PROFESSIONAL PLUMBING & RESTORATION 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:

Benjamin Sperry, Esquire

(Contact Person)

Sperry Law Firm

(Firm/Company)

1607 S. Alexander Street, Suite 101

(Address)

Plant City, Florida 33563

(City/State and Zip Code)

For further information concerning this matter, please call:

Benjamin Sperry, Esquire

813 754-3030
at ()
(Area Code & Daytime Telephone Number)

(Name of Contact Person)

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



2023 JUL 31 AM 7:16

ALLAHASSI, LLC

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: PROFESSIONAL PLUMBING & RESTORATION LLC

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

L19000210263

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/24/2023

4. I, Shilaan Said Hakky, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager

(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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