K19000731036

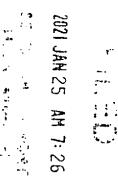
(Re	questor's Name)	
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(/ 10	.a.c.33)	
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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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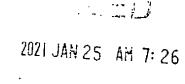


O SIMMONS MAR 0 8 2021

COVER LETTER

TO:	_	stration Section sion of Corporations			
	ואועו	sion of Corporations			
SUBJ	ECT:	The Food Deck, LLC			
		(Name of Limited Liability Company)			
The e	nclosed	d member, resignation or diss	sociation and fee	(s) are submitted for filing.	
Please	e returr	all correspondence concerni	ing this matter to	:	
Huy N	guyen				
		(Contact Person)		_	
The Fo	ood Decl	k, LLC			
		(Firm/Company)		_	
102 G	oldfish (Court			
		(Address)	<u></u> .	_	
Port St	t. Joe, Fl	orida 32456			
		(City/State and Zip Code)			
For fu	irther i	nformation concerning this m	natter, please call	l:	
Huy N	guyen		850 at (247-0317	
	(N	Jame of Contact Person)		le & Daytime Telephone Number)	
Enclo	sed ple	ease find a check made payab	le to the Florida	Department of State for:	
\$ 2	5 Filin	g Fee	□ \$55 Filir	ng Fee & Certified Copy	
		ng Address: stration Section		Street Address: Registration Section	
		sion of Corporations		Division of Corporations	
		Box 6327		The Centre of Tallahassee	
	Talla	hassee, FL 32314		2415 N. Monroe Street, Suite 810	
				Tallahassee, FL 32303	





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
of State is:	ood Deck, LLC
2. The Florida docu L19000231036	ment/registration number assigned to this limited liability company is:
3. The date this men	mber/manager withdrew/resigned or will withdraw/resign is:
	, hereby withdraw/resign as a ame of Person Resigning)
Authorized Memb	ет
(Print Title)
of this limited liab resignation in wri	oility company and affirm the limited liability company has been notified of my ting.
	1/14
Signature of Dis	sycilating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)