

L20000000 8997

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

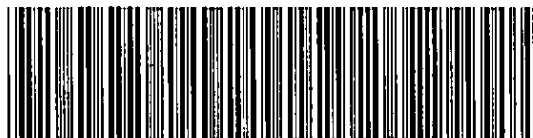
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S TALLENT

SEP 15 2020

2020 SEP 14 AM 8:36

Miss/Resign
at law



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 SEP 11 PM 4:04

August 18, 2020

LISA SMAGA
SLIP & FALL PREVENTION SERVICES, LLC
5117 15TH AVE S.
GULFPORT, FL 33707

SUBJECT: SLIP & FALL PREVENTION SERVICES, LLC
Ref. Number: L20000008997

We have received your document and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

IF KEN SMAGA IS RESIGNING, HE MUST FILL OUT THE DISSOCIATION OR RESIGNATION OF MEMBER FORM PROVIDED. PLEASE RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Susan Tallent
Regulatory Specialist II

Letter Number: 720A00015707

msg 9/8/20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 2, 2020

LISA SMAGA
SLIP & FALL PREVENTION SERVICES, LLC
5117 15TH AVE S.
GULFPORT, FL 33707

SUBJECT: SLIP & FALL PREVENTION SERVICES, LLC
Ref. Number: L20000008997

We have received your document and check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

IF KEN SMAGA IS RESIGNING AS AN AUTHORIZED PERSON, PLEASE COMPLETE THE ATTACHED FORM AND RESUBMIT.

THE TITLE FOR LISA SMAGA IS AP INSTEAD OF OWNER. PLEASE AMEND ACCORDINGLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Susan Tallent
Regulatory Specialist II

Letter Number: 520A00013034

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Slip and Fall Prevention Services 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:

Lisa Smaga
(Contact Person)

Slip and Fall Prevention Services, LLC
(Firm/Company)

5117 15th Ave S.
(Address)

Gulfport, FL 33707
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Smaga at (727) 248-1347
(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

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

mailed
8/11/20
9/9/20



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: Slip & Fall Prevention Services, LLC

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

L20000008997

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/2/20

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

Authorized Person
(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)

2020 SEP 14 AM 8:36