

L21000153867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

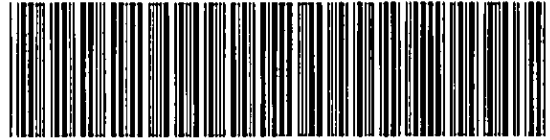
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/27/22--01009--027 **25.00

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2024 DEC 27 PM 2:53
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: C&T HOLDINGS OF MELROSE, 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:

CHAD HOVSEPIAN

(Contact Person)

(Firm/Company)

829 N. STATE RD 21

(Address)

MELROSE, FL 32666

(City/State and Zip Code)

For further information concerning this matter, please call:

CHAD HOVSEPIAN

(Name of Contact Person)

352 494-3584
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

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

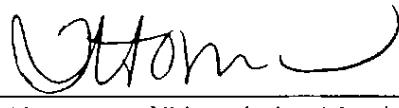
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: C&T HOLDINGS OF MELROSE, LLC

2. The Florida document/registration number assigned to this limited liability company is:
88-0571520

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/15/2022

4. I, TARA HOVSEPIAN, hereby withdraw/resign as a
(Print Name of Person Resigning)
ASSOCIATE MEMBER
(Print Title)

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

X 

Signature of Dissociating Member or Resigning Manager

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

RECEIVED
2022-12-27 PM 2:53
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DIVISION OF CORPORATIONS
TALLAHASSEE, FL