

121000345478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/19/22--01002--016 **25.00

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FILED
2022 MAR 31 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FL

J. J. SIMMONS

MAY 02 2022



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2022

SAMUEL ANDREWS
603-63RD AVE W, UNIT W14
BRADENTON, FL 34207

SUBJECT: HALLELUJAH ENTERPRISE, LLC
Ref. Number: L21000345478

We have received your document for HALLELUJAH ENTERPRISE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 522A00000874

RECEIVED

2022 MAR 31 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HALL ELIJAH Enterprise
(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:

Samuel Andrews
(Contact Person)

Hallelujah Enterprise
(Firm/Company)

603 63rd Ave West of E 15
(Address)

Bradenton FL 34207
(City/State and Zip Code)

For further information concerning this matter, please call:

Samuel Andrews at 941 757-7046
(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



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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)

1. The name of the limited liability company as it appears on the records of the Florida Department

of State is: HALLELUSAH ENTERPRISE

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

L21000345478

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/25/2022

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

VP
(Print Title)

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

Samuel Adams
Signature of Dissociating Member or Resigning Manager

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