

L21000386426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

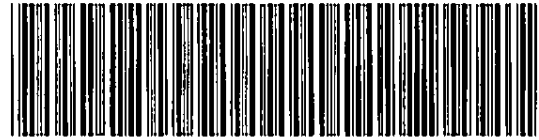
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2022 OCT -4 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STRATEGIC OUTCOMES FLORIDA
(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:

DALE COMSTOCK
(Contact Person)

STRATEGIC OUTCOMES FLORIDA
(Firm/Company)

200 FRIARS HILL DR APT 201
(Address)

PANAMA CITY FLORIDA 32407
(City/State and Zip Code)

For further information concerning this matter, please call:

DALE COMSTOCK at (850) 625-0766
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 OCT -4 AM 9:31

August 2, 2022

DALE COMSTOCK
200 FRIARS HILL DR
APT 201
PANAMA CITY BEACH, FL 32704

SUBJECT: STRATEGIC OUTCOMES FLORIDA LLC
Ref. Number: L21000386426

We have received your document for STRATEGIC OUTCOMES FLORIDA LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong form was sent. I am enclosing the correct form for Larry to Resign as Manager.

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) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 122A00017252



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

2022 OCT -4 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FL

**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: STRATEGIC OUTCOMES FLORIDA LLC

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

C 21000386 426

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1 MAY 2022

4. I, LARRY SMITH, 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.

Larry Smith Jr.
Signature of Dissociating Member or Resigning Manager

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