

121 000391898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

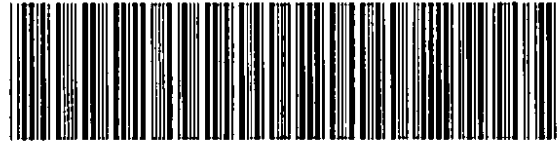
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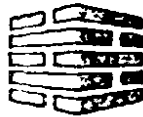
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Dissociation

EST 1-7 2022

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BRICK BUSINESS LAW, P.A.
FLORIDA LITIGATION AND COUNSEL

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Jocelyn C. Smith, Esq.
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Email:
Danielle.Peynado
@BrickBusinessLaw.com

July 5, 2022

VIA U.S. FIRST CLASS MAIL:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**RE: TROPICAL HOUSE TRANSFORMATIONS, LLC – L21000391898 -
DISSOCIATION OR RESIGNATION OF MEMBER**

Dear Sir/Madam

Please find enclosed the following documents in connection with the above-mentioned Company and its filing of a Dissociation Or Resignation Of Member:

1. Dissociation Or Resignation Of Member Cover Letter;
2. Dissociation Or Resignation Of Member Form; and
3. BBL Check #556 in the amount of \$25.00.

We would be grateful if you could process the enclosed Dissociation Or Resignation Of Member request. Should you have any questions or need anything else in the meantime, please contact me via the email address or telephone above.

Sincerely,

Danielle Peynado
Paralegal

Encls.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TROPICAL HOUSE TRANSFORMATIONS, 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:

DANIELLE PEYNADO

(Contact Person)

BRICK BUSINESS LAW, P.A.

(Firm/Company)

3413 W FLETCHER AVE

(Address)

TAMPA, FLORIDA 33618

(City/State and Zip Code)

For further information concerning this matter, please call:

DANIELLE PEYNADO

at (813) 816-1816

(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

CR2E079 (2/14)

MB *MW*



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: TROPICAL HOUSE TRANSFORMATIONS, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L21000391898

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/10/2022

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

MGR

(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)