121000407733

(Requestor's Name)					
(Address)					
(Address)					
(1881855)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Littly Name)					
(Document Number)					
Certified Copies Certificates of Status					
<u> </u>					
Special Instructions to Filing Officer:					
	ĺ				

Office Use Only



12.725/21--31019--004 **29.00

2021 DEC 20 MM 6 42 SECRETARY CE STATE

JAN 07 2022

COVER LETTER

_	stration Section sion of Corporations			
SUBJECT:	Everything For Deuce, LLC			
bobber.	(Name of Limited Liability Company)			
The enclosed	d member, resignation or diss	sociation and fee(s) are submitted for filing.	
Please return	all correspondence concerni	ing this matter to:		
Ryan Smith				
	(Contact Person)			
Everything for	Deuce LLC			
	(Firm/Company)		_	
14302 Derby R	Ridge Road			
<u> </u>	(Address)		_	
Bowie, MD 20	0721			
	(City/State and Zip Code)	 	_	
For further is	nformation concerning this n	natter, please call:		
Ryan Smith		202 at (3440983	
(2)	Name of Contact Person)		& Daytime Telephone Number)	
Enclosed ple	ease find a check made payab	ole to the Florida l	Department of State for:	
■ \$25 Filin	g Fee	□ \$55 Filin	g Fee & Certified Copy	
	ng Address:		Street Address:	
_	stration Section sion of Corporations		Registration Section Division of Corporations	
	Box 6327		The Centre of Tallahassee	
	ahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	



FILED

2021 DEC 20 AM 6: 42

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)

	limited liability company as i	t appears on the records of the Florida Department
2. The Florida docu L21000407723	ument/registration number ass	igned to this limited liability company is:
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is: 12/14/2021
4. I, Christian A Carte		, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	
AMBR		
	(Print Title)	
of this limited lia resignation in wr		limited liability company has been notified of my
and	a. Cat	
Signature of D	issociating Member or Resign	ing Manager
~	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	