## L21000422860

(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:				
J. HORNE SEP 19 2022				

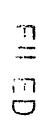




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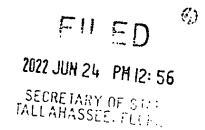




## COVER·LETTER

	Registration Section		
]	Division of Corporations		
SUBJE	CT: 3Fit Foods LLC		
	(Name of	Limited Liability Co	om <del>p</del> any)
The enc	losed member, resignation or diss	sociation and fee	(s) are submitted for filing.
Please r	eturn all correspondence concern	ing this matter to	<b>:</b>
James Ha	rper		
	(Contact Person)		_
3Fit Food	ls LLC		
	(Firm/Company)		<del></del>
2340 Stat	e Road 580 STE B		
	(Address)		<del>_</del>
Clearwate	er, FL 33763		
	(City/State and Zip Code)		<del></del>
For furth	ner information concerning this m	natter, please call	:
James Ha	грег	407 at (	844-7332
	(Name of Contact Person)		e & Daytime Telephone Number)
Enclosed	d please find a check made payab	le to the Florida	Department of State for:
	Filing Fee		ng Fee & Certified Copy
<u>.</u>	Mailing Address:		Street Address:
ŀ	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327 Fallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	. w.		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)

	e limited liability company as it appears on the records of the Florida Department Foods LLC
2. The Florida doo L21000422860	cument/registration number assigned to this limited liability company is:
4. I,	, hereby withdraw/resign as a
(Print) Manager	Name of Person Resigning)
	(Print Title)
resignation in w	ability company and affirm the limited liability company has been notified of my riting.  Dissociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Ontional)