## L22000046278

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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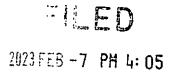
2023 TEB -7 PM I: 05

## **COVER LETTER**

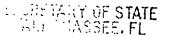
TO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	Jamie's Fun Nights Adult Gaming	LLC	
50202011	(Name of L	imited Liability	Company)
The enclosed	d member, resignation or disso	ciation and fe	ee(s) are submitted for filing.
Please return	all correspondence concerning	g this matter	to:
Lori Lattimore	:		
	(Contact Person)		
	(Firm/Company)		<del></del>
2007 NW 27-1			
2007 NW 37th	(Address)		
Lauderdale La	kes, Fl. 33311		
	(City/State and Zip Code)		<del></del>
For further i	nformation concerning this ma	itter, please ca	all:
Lori Lattimore	:	954 at (	649-8929
(N	lame of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed ple	ease find a check made payable		
□ \$25 Filin	g Fee	<b>■ \$55</b> Fil	ling Fee & Certified Copy
	ng Address:		Street Address:
_	stration Section		Registration Section
	sion of Corporations		Division of Corporations The Centre of Tallahassee
	Box 6327		2415 N. Monroe Street, Suite 810
rana	hassee, FL 32314		ZTID IN INIOINOC SUCCI, SUIC OI

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 e's Fun Nights Adult Gaming LLC
2. The Florida doc L22000046278	nument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is: 1/31/2022
4. I, Abigail Lattimo	
MGR /V	(Print Title)
resignation in w	1 L. Sallmere
Signature of D	issociating Member or Resigning Manager
	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)