## 122000081635

(Requestor's Name)
(Requestors Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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2022 MAR 29 AM 9: 30 SECRETARY OF STATE

### **COVER LETTER**

**Division of Corporations** Palm City Entertainment **SUBJECT:** (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: Stephen Johnson (Contact Person) Palm City Entertainment (Firm/Company) 1735 Brantley Road APT 2313 (Address) Fort Myers, Florida, 33907 (City/State and Zip Code) For further information concerning this matter, please call: Stephen Johnson (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ■ \$25 Filing Fee ☐ \$55 Filing Fee & Certified Copy Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

TO:

**Registration Section** 



# PLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	nited liability company as it appears on the records of the Florida Department
of State is:	y Entertaiment
2. The Florida docum	nent/registration number assigned to this limited liability company is:
1.22000081635	
	3/23/22
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is:
Hunter S. Dahlen	me of Person Resigning) , hereby withdraw/resign as a
4. 1,(Print Na	me of Person Resigning)
AP Hunter [	
	Print Title)
of this limited liab resignation in wri	oility company and affirm the limited liability company has been notified of my ting.
Hunter Z	Dahlen
Signature of Di	ssociating Member or Resigning Manager
	cos no (Dirad)
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)
Certified Copy:	anno (Alexania