## 122000174165

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
|   |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (D) (F) (A)                             |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
|   |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
|   |  |  |  |  |
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TALLAHASSEE, FLORIDA

FILED 2022 JUN 27 AM 10: 42

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## **COVER LETTER**

| TO:          | Registration Section Division of Corporations |                              |  |
|--------------|---|------------------------------|--|
|              | 369 Promotions, LLC                           |                              |  |
| SUB.         | JECT:   |                              |  |
|              |   | Limited Liability Company)   |  |
| The e        | enclosed member, resignation or diss          | ociation and fee(s) are subm | itted for filing.                        |
| Pleas        | e return all correspondence concern           | ng this matter to:           |  |
| Jack S       | Stanton                                       |                              |  |
|              | (Contact Person)                              |                              |  |
| 369 P        | romotions, LLC                                |                              |  |
|              | (Firm/Company)                                |                              |  |
| 14476        | Amberly Lane, Suite 701                       |                              |  |
|              | (Address)                                     |                              |  |
| Delray       | y Beach, Florida 33446                        |                              |  |
| •            | (City/State and Zip Code)                     |                              |  |
| For fu       | urther information concerning this n          | atter, please call:          |  |
| Jack S       | Stanton                                       | 516 5096991                  |  |
|              | (Name of Contact Person)                      | (Area Code & Daytime         | Telephone Number)                        |
| Enclo        | osed please find a check made payab           | le to the Florida Department | of State for:                            |
| <b>=</b> \$2 | 5 Filing Fee                                  | □ \$55 Filing Fee & Ce       | rtified Copy                             |
|              | Mailing Address:                              | Street Addi                  | ress:                                    |
|              | Registration Section                          | Registrati                   | on Section                               |
|              | Division of Corporations                      |                              | of Corporations                          |
|              | P.O. Box 6327                                 |                              | re of Tallahassee                        |
|              | Tallahassee, FL 32314                         |                              | Monroe Street, Suite 810<br>ee, 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)

| 369 P                                     | limited liability company a | as it appears on the records of the Florid | a Depart           | ment       |
|---|-----------------------------|--|--------------------|------------|
| 2. The Florida docu<br>1,22000174165      | ument/registration number a | assigned to this limited liability compan  | ıy is:             |            |
| -   | <del>-</del> .              | 6/23/                                      | 2022               |            |
| 3. The date this me<br>Jason Halpern      | mber/manager withdrew/re    | signed or will withdraw/resign is:         |                    |            |
| 4. l,                                     |                             | , hereby withdraw/resign as a              |                    |            |
| (Print N<br>Manager                       | ame of Person Resigning)    |  |                    |            |
| <del> </del>                              | (Print Title)               |  |                    |            |
| of this limited lial<br>resignation in wr | • • •                       | the limited liability company has been n   | iotifi <b>ed</b> o | f my       |
| Jan                                       | u Helpu                     |  |                    |            |
| Signature of Di                           | ssociating Member or Resi   | gning Manager                              |                    |            |
|   |                             |  | MLLAIKS            | 2022 JUN 2 |
| Filing Fee:                               | \$25.00 (Required)          |  | <u> </u>           | J          |
| <del>-</del>                              | \$30.00 (Optional)          |  | 50                 | ~<br>~     |