L2200240023

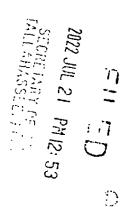
| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | 3333 |
| (Cit | y/State/Zip/Phone | |
| PICK-UP | MAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
| | J. HOF | RNE |
| | OCT 19 | 2022 |
| | | ; |
| | | |

Office Use Only



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COVER LETTER

| TO: | Regis | stration Section | * | |
|-------------|-----------|--------------------------------|----------------------|----------------------------------|
| | Divis | sion of Corporations | • | |
| SUBJ | IECT: | Boozy Flamingo LLC | | |
| | | (Name of L | imited Liability Co. | mpany) |
| The e | nclosed | l member, resignation or disso | ociation and fee(| s) are submitted for filing. |
| Please | e return | all correspondence concerning | ng this matter to: | |
| Tina S | mith | | | |
| | | (Contact Person) | . 2410 PV- | |
| Boozy | Flaming | go LLC | | |
| | | (Firm/Company) | | _ |
| 7328 T | Chomas I | Or Sie A | | |
| | | (Address) | | _ |
| Panam | a City, F | FI 32408 | | |
| | | (City/State and Zip Code) | | _ |
| For fu | irther ii | nformation concerning this ma | atter, please call: | |
| Tina S | mith | | 770 at (| 843-6886) |
| | (N | ame of Contact Person) | (Area Code | & Daytime Telephone Number) |
| Enclo | sed ple | ase find a check made payable | e to the Florida I | Department of State for: |
| S 2. | 5 Filing | g Fee | S55 Filin | g Fee & Certified Copy |
| | Mailir | ng Address: | | Street Address: |
| | | stration Section | | Registration Section |
| | | ion of Corporations | | Division of Corporations |
| | | Box 6327 | | The Centre of Tallahassee |
| | Talla | hassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 |
| | | | | 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)

| of State is: | |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| 2. The Florida document/registration numb | er assigned to this limited liability company is: |
| 1451772 | |
| 3. The date this member/manager withdrew | //resigned or will withdraw/resign is: |
| 4. I. Perry Biggs (Print Name of Person Resigning) | , hereby withdraw/resign as a |
| (Print Name of Person Resigning) | |
| Manager | |
| (Print Title) | |
| of this limited liability company and affir resignation in writing. Signature of Dissociating Member or R | m the limited liability company has been notified of my esigning Manager |
| | |

Certified Copy:

\$30.00 (Optional)