L22 000 248178

н)	equestor's Name)
(A	ddress)
(A	adress)
(Address)	
(^	
((City/State/Zip/Phone #)
(0	
PICK-UP	
(E	Business Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
Office Use Only	



03/12/22--01018--019 **25.00



DEC 2 0 2027

COVER LETTER

TO: Registration Section Division of Corporations

F & F Palms LLC 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:

Harold Felder

٠,

(Contact Person)

F & F Palms LLC

(Finn/Company)

8512 Windy Circle

(Address)

Boynton Beach, FL 33472

(City/State and Zip Code)

For further information concerning this matter, please call:

 Harold Felder
 906
 373-6854

 (Name of Contact Person)
 (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee S25 Filing Fee & Certified Copy

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N, Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



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)

- 1. The name of the limited liability company as it appears on the records of the Florida Department of State is: _____
- 2. The Florida document/registration number assigned to this limited liability company is: . . . L22000248178
- 3. The date this member/manager withdrew/resigned or will withdraw/resign is:
- Walter Flournoy 4. [. _____

Flournoy______, hereby withdraw/resign as a ______, *hereby withdraw/resign as a ______*, hereby withdraw/resign as a ______, hereby withdraw/resign as a ______.

Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

WOHER FlocintNO / Signature of Dissociating Member or Resigning Manager

Filing Fee: Certified Copy: \$25.00 (Required) \$30.00 (Optional)

2022 SEP 1.2 ANTE: 25