

L22 000 S34 471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

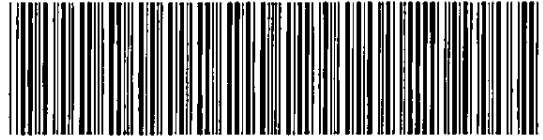
(Business Entity Name)

(Document Number)

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11/26/24--01003--029 \*\*25.00

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24 NOV 26 PM 5:45  
CALL 606-555-1100

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Farm Table Mgmt  
(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:

Chris Evans  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

905 Hwy 418  
(Address)

Simpsonville, SC 29680  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Evans at (864) 729 1853  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

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



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: Farm Table Mgmt LLC

2. The Florida document/registration number assigned to this limited liability company is:

L22000534471

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/1/24

4. I, Christopher Evans, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Mgr  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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