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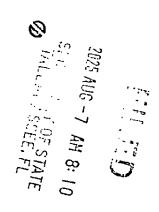
(Requestor's Name)
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COVER LETTER

TO: Registration Section **Division of Corporations** Flagler Estate Sales 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: Skyler Ciolinol (Contact Person) Flagler Estate Sales LLC (Firm/Company) 300 Palm Coast Parkway NE (Address) Palm Coast, Florida 32164 (City/State and Zip Code) For further information concerning this matter, please call: Skyler Ciolino (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

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)

The Florida document/registration	on number assigned to this limited liability company is:
L2400019996 2	
The date this member/manager w	vithdrew/resigned or will withdraw/resign is: 7/1/2025
Hilda R. Moore L	, hereby withdraw/resign as a 🔞
(Print Name of Person Resi	gning)
AMBR	gning) TALL
(Print Title)	
of this limited liability company a	and affirm the limited liability company has been notified of in
esignation in writing.	AI 8:
a Stelder St.	TE 10

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30,00 (Optional)