L24000330670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. PRATHER

THE HERNANDEZ LAW FIRM, P.A.

ATTORNEYS & COUNSELORS AT LAW

January 3, 2025

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Suncoast Acupuncture Services, LLC
No.: L24000330670

Dear Sir or Madam:

Enclosed is a Cover Letter and Dissociation of Member/Manager form for the Florida Limited Liability Company referred to above accompanied by my check in the amount of $55.00 for filing fee and certified copy.

Kindly forward the certified copy to my attention at the address stated below.

Very truly yours,
THE HERNANDEZ LAW FIRM, P.A.

By: Kevin Hernandez, Esquire

KH:hms
cc: Alan Heinlein

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Suncoast Acupuncture Services, LLC
(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:

Kevin Hernandez, Esquire
(Contact Person)

The Hernandez Law Firm, P.A.
(Firm/Company)

28059 US Highway 19N, Suite 101
(Address)

Clearwater, FL 33761
(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin Hernandez, Esquire at (727) 712-1710
(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

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: Suncoast Acupuncture Services, LLC.

2. The Florida document/registration number assigned to this limited liability company is: L24000330670.

3. The date this member/manager withdrew/resigned or will withdraw/resign is: January 3, 2025

4. I, Alan Heinlein, *(Print Name of Person Resigning)* hereby withdraw/resign as a Member and Manager. *(Print Title)*

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

Signature of Dissociating Member or Resigning Manager

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

2025 JAN -7 AM 6:12

CR2E079 (2/14)