

L24 000 343141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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CLERK OF COURT
HALL COUNTY, FL

NO \$



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2024

GRZEGORZ RZESZUTEK
1724 REDWOOD STREET, APT. 2
SARASOTA, FL 34231

SUBJECT: SMART & PAINTLESS DENT REPAIR LLC
Ref. Number: L24000343141

We have received your document for SMART & PAINTLESS DENT REPAIR LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 924A00020040

2024 SEP 24 AM 10:58
TALLAHASSEE, FL

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SMART & PAINTLESS DENT REPAIR 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:

GRZEGORZ RZESZUTEK

(Contact Person)

SMART & PAINTLESS DENT REPAIR LLC

(Firm/Company)

1724 REDWOOD STREET, AP. 2

(Address)

SARASOTA, FLORIDA 34231

(City/State and Zip Code)

For further information concerning this matter, please call:

RENATA RZESZUTEK

941

2983369

at ()

(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

RECEIVED

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: SMART & PAINTLESS DENT REPAIR LLC

2. The Florida document/registration number assigned to this limited liability company is:
L24000343141

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/28/2024

4. I, RENATA EDYTA RZESZUTEK, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGER (MGR)
(Print Title)

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

Renata Rzeszutek

Signature of Dissociating Member or Resigning Manager

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

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2024 SEP 24 AM 10:58
TALLAHASSEE, FL