

L24000400307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

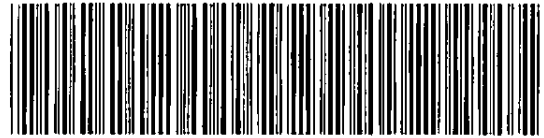
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200436977112

09/24/24--01003--011 **25.00

FILED
2024 SEP 24 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FLAGLER AVENUE PIZZA 396 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:

PETER BEAULIEU

(Contact Person)

(Firm/Company)

711 A SOUTH GLENCOE RD

(Address)

NEW SMYRNA BEACH, FL 32168

(City/State and Zip Code)

For further information concerning this matter, please call:

PETER BEAULIEU 386 566-3486

(Name of Contact Person) at (_____) (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

