M10000002003

(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



400348782784

RECEIVED

JUL 1 6 2020

07/23/20--01020 -022 **25.00

SECKETARY OF STATE OF CORPORATIONS

neutospea a

COVER LETTER

TO: Registration Section Division of Corporations			
ALL-PAC DISTRIBUTING L. SUBJECT:	IC.		
(Name o	of Limited Liability Company)		
The enclosed member, resignation or di	ssociation and fee(s) are submitted for filing.		
Please return all correspondence concer	ming this matter to:		
Sherri Snow			
(Contact Person)			
ALL-PAC DISTRIBUTING L.L.C.			
(Firm/Company)	, , , , , , , , , , , , , , , , , , , 		
176 4th Ave NE Unit 801			
(Address)			
St.Petersburg, FL 33701			
(City/State and Zip Code)			
For further information concerning this	matter, please call:	20	: ::::::::::::::::::::::::::::::::::::
Sherri Snow	813 417-0995 at ()		원 기품(
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	ກ (≅:	10.00 10.00
Enclosed please find a check made paya ■ \$25 Filing Fee	able to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy	JUL 18 (MIO: 16	CHEPORATIONS
Mailing Address:	Street Address:		
Registration Section Division of Corporations	Registration Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E079 (2/14)

Tallahassee, FL 32314



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)

	limited liability company PAC DISTRIBUTING L.L.C.	as it appears on the records of th	ne Florida Dep	partment
2. The Florida docu Mt0000002003	ment/registration number	assigned to this limited liability	company is:	
Clar D. William	_	esigned or will withdraw/resign		SECKE I
4. I, (Print No.) MGRM / Vice I		, hereby withdraw/resign	i as a	一 5000
·		the limited liability company ha	ıs been notifie	AN IO: I MY
Signature of Dis	ssociating Member or Res	igning Manager		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			