

M14000005087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

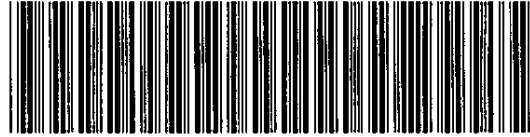
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700274844957

07/29/15--01008--022 \*\*20.00

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FILED  
15 JUL 28 PM 12:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 29 2015

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Great Beverage Products 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:

Robbin McCool  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

1201 Loblolly Ct.  
(Address)

OFallon IL 62269  
(City/State and Zip Code)

For further information concerning this matter, please call:

Aramina McCool at (770) 265-8082  
(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

Payment of \$35<sup>00</sup> has been made. Additional \$20<sup>00</sup> is attached for Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

July 23, 2015

TO: FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

SUBJECT: **GREAT BEVERAGE PRODUCTS LLC**

REF NUMBER: **M14000005087**

I SENT AN INCORRECT FORM FOR **GREAT BEVERAGE PRODUCTS LLC**.

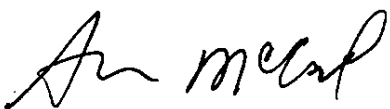
THIS IS THE CORRECT FORM.

PAYMENT OF \$35.00 ON PREVIOUS FORMS HAVE CLEARED BANK.

ATTACHED IS AN ADDITION FEE OF \$ 20.00 FOR A **CERTIFIED COPY**.

IF YOU HAVE ANY QUESTIONS PLEASE CONTACT

ARAMINA MCCOOL 770-265-8082

A handwritten signature in black ink, appearing to read "Aramina McCool". The signature is fluid and cursive, with the first name "Aramina" and last name "McCool" clearly distinguishable.

THANK YOU



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

15 JUL 28 PM 3: 22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 20, 2015

ROBBIN G MCCOOL  
1201 LOBLOLLY CT  
O FALLON, IL 62269

SUBJECT: GREAT BEVERAGE PRODUCTS LLC  
Ref. Number: M14000005087

We have received your document for GREAT BEVERAGE PRODUCTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6051.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 815A00015153



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: Great Beverage Products LLC

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

M14000005087

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Feb. 9, 2015

4. I, Robbin McCool, hereby withdraw/resign as a  
(Print Name of Person Resigning)

mgr  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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

\$20.00 Additional fee for certified copy  
Attached.  
Previous check for \$35.00 has been paid

FILED  
5 JUL 28 PM 12:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA