

**L12000013282**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

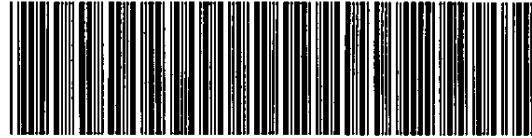
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



**500289204165**

08/23/16--01004--022 \*\*25.00

AUG 23 2016

**S. YOUNG**

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 23 PM 5:03

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: UTSC 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:

Tatian Rhominskaya  
(Contact Person)

UTSC LLC  
(Firm/Company)

1250 E. Hollandale Beach Blvd #402  
(Address)

Hollandale, FL 33009  
(City/State and Zip Code)

For further information concerning this matter, please call:

Margie Neff at (305) 216-0368  
(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

### 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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 AUG 23 PM 5:03



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: UTSC LLC

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

L12000013282

3. The date this member/manager withdrew/resigned or will withdraw/resign is: \_\_\_\_\_

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

MANAGER MEMBER  
(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)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 AUG 23 PM 5:04