## L18000197937

(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:				
no				
111				

Office Use Only



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SEURETARY OF STATE

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## **COVER LETTER**

Division of Corporations		
EDOC BUSINESS LLC		
(Name of	Limited Liability (	(ompany)
The enclosed member, resignation or dis	sociation and fe	e(s) are submitted for filing.
Please return all correspondence concern	ing this matter t	o;
OMAR EGFA		
(Connet Person)	<del></del>	<del></del>
EDOC BUSINESS LLC		
(Firm/Company)		- <del></del>
111 ORANGE AVE - SUITE 315		
(Address)		<del></del>
FORT PIERCE, FL 34950		
(City/State and Zip Code)		<del></del>
For further information concerning this r	natter, please ca	11:
OMAR EGEA	954 at (	330-9061
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed please find a check made payat  ☐ \$25 Filing Fee	ole to the Florida \$55 Fil	a Department of State for: ing 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

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605 0236, Herida Statutes).

	: limited liability company as C BUSINESS LLC	it appears on the records of the Florida Department
		ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is: 07/27/2022
		hereby withdraw/resign as a
(Prim	kame of Person Resigning)	
DRECTOR		
	(Prim Title)	
of this limited lia resignation in wi		e limited liability company has been notified of my
afonus	issociating Member or Resig	
Signature of D	issberating Member or Resig	ning Manager
Filing Fee:	\$25,00 (Required)	
Certified Copy:	\$30.00 (Optional)	