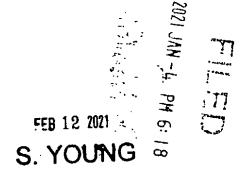
## 

(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:				





01/04/21--01023--016 \*\*\$5.00



## **COVER LETTER**

	Registration Section		
U	Division of Corporations		
SUBJEC	TORQUED CUSTOM DETAILIN	G LLC	
002,701	(Name of L	imited Liability Cor	npany)
The encl	osed member, resignation or disso	ociation and fee(s	s) are submitted for filing.
Please re	eturn all correspondence concernin	ig this matter to:	
STEPHAN	NIE SCALFARI		
	(Contact Person)		<del>-</del>
TORQUE	D CUSTOM DETAILING LLC		
	(Firm/Company)		_
10809 CA	RLOWAY HILLS DRIVE		
	(Address)		_
WIMAUN	MA, FL 33598		
	(City/State and Zip Code)		_
For furth	ner information concerning this ma	atter, please call:	
STEPHA	NIE SCALFARI	813 at (	514-5954
	(Name of Contact Person)	(Area Code	_) e & Daytime Telephone Number)
	d please find a check made payable filing Fee		
R	dailing Address: Registration Section		Street Address: Registration Section
F	Division of Corporations P.O. Box 6327 Fallahassee, FL 32314		Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303



## 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: Toequed Custom Detaling LLC
2. The Florida document/registration number assigned to this limited liability company is:
L18008224582
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Nou 15 2020
4. I, Print Name of Person Resigning), hereby withdraw/resign as a
CEO
(Print Title)  of this limited liability company and affirm the limited liability company has been notified of my
resignation in writing.
La Cart
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) > Enclosed \$5500 Money Orders
$\mathcal{A}$
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