

K21000196038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

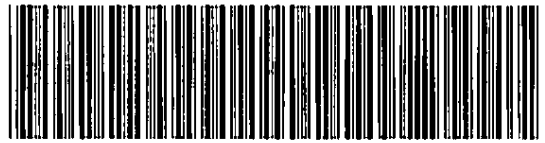
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900388295049

05/27/22--01023--018 \*\*55.00

FILED  
2022 MAY 27 PM 2:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*File*

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ACL BANNON LAKES, 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:

Gilbert Contreras

\_\_\_\_\_  
(Contact Person)

Contreras & Camacho, P.A.

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

141 Almeria Avenue

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

Coral Gables, FL 33134

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gilbert Contreras

786 594-0180  
at ( )

\_\_\_\_\_  
(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

**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



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: ACL BANNON LAKES, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L21000196038

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5/23/2022

4. I, Alberto J. Suarez, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Manager

*(Print Title)*

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

AJ Suarez  
AJ Suarez (May 23, 2022 13:00 EDT)

May 23, 2022

Signature of Dissociating Member or Resigning Manager

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

FILED  
2022 MAY 27 PM 2:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA