



**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UNITED WORLD WIDE VAN LINES 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:

Sarah Drummond  
\_\_\_\_\_  
(Contact Person)

n/a  
\_\_\_\_\_  
(Firm/Company)

7212 US HWY 1  
\_\_\_\_\_  
(Address)

PORT ST LUCIE, FL 34952  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sarah Drummond at ( 772 ) 204-6122  
\_\_\_\_\_  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

S25 Filing Fee  S55 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

**FILED**  
2023 JUL 26 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FL



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)

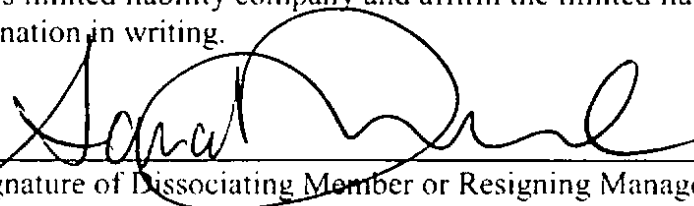
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: UNITED WORLD WIDE VAN LINES LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L22000360327

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/21/2023

4. I, Sarah Drummond, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Manager/ Owner  
*(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

FILED  
2023 JUL 26 AM 11:19  
SECRETARY OF STATE  
TALLAHASSEE, FL

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