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COVER LETTER .

Division of Corporations
SUBJECT: AMENICAN TOWING OF MIAMI 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:
JUSC. R. GAVCIA. (Contact Person)
AMERICANTOWING (7 MAIN) LLC
2240 NW 2510 AVP.
Minmi FL 331412 (City State and Zip Code)
For further information concerning this matter, please call:
JUSE GARCIA at (305), 637-5000 (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 Street Address: Registration Section Division of Corporations The Centre of Tallahassee

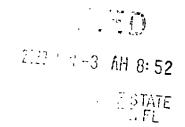
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: Registration Section





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: American Towing of Micimi LLC
2. The Florida document/registration number assigned to this limited liability company is:
LI5000123200
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12 22 2022
4. 1. NOEL VIGIL BENITEZ , hereby withdraw/resign as a (Print Name of Person Resigning)
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)