

L 22000 340544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

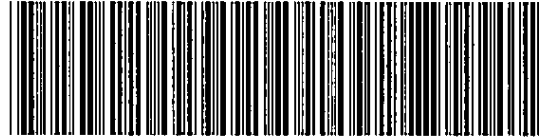
(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SASAC MOTORWORKS LLC

SUBJECT: _____
(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:

JOSE CASAS

(Contact Person)

SASAC MOTORWORKS LLC

(Firm/Company)

6351 NW 99TH AVENUE, DORAL, FLORIDA - 33178

(Address)

DORAL, FLORIDA - 33178

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE CASAS

786

6593362

(Name of Contact Person) at (_____) _____
(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

February 2, 2023

JOSE CASAS
6351 NW 99TH AVENUE
DORAL, FL 33178

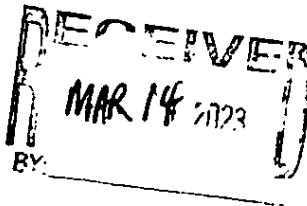
SUBJECT: SASAC MOTORWORKS LLC
Ref. Number: L22000340544

We have received your document for SASAC MOTORWORKS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan
Regulatory Specialist III

Letter Number: 723A00002495





FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

2023 MAR 14 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FL

**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
SASAC MOTORWORKS LLC
of State is: _____

2. The Florida document/registration number assigned to this limited liability company is:
1.220003-40544

3. The date this member/manager withdrew/resigned or will withdraw/resign is: _____
GERARDO CASAS

4. I, _____, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGR

(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)