LOO 000015294

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
(Bu	isiness Entity Nar	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<u> </u>		
	Office Use On	ly

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TO:	Registration Section
	Division of Corporations

SUBJECT: Service Ace, L.L.C.

(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:

Linda L. Worthington

C.

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(Contact Person)

Service Ace, L.L.C.

(Firm/Company)

1606 N.W. 10th Street

(Address)

Ocala, FL 34475

(City/State and Zip Code)

For further information concerning this matter, please call:

 Linda L. Worthington
 352
 299 7098

 (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 S55 Filing Fee & Certified Copy

Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
· · · · ·	Tallahassee, FL 32303

CR2E079 (2/14)



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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: Service Ace, L.L.C.
- 2. The Florida document/registration number assigned to this limited liability company is: L00000015294

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

4. I, _____

_____, hereby withdraw/resign as a

(Print Name of Person Resigning)

MGRM

(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)

CR2E079 (2/14)