

LOI 000021618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

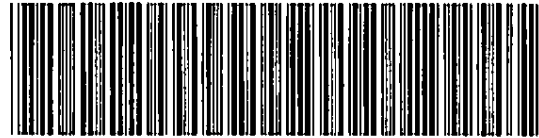
(Business Entity Name)

(Document Number)

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2022 JUN 27 PM 1:04
SOUTHERN DISTRICT
TALAMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AR-TEC GROUP SERVICES, 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:

FRANCISCO BLEISCHMIDT

(Contact Person)

AR-TEC GROUP SERVICES, LLC

(Firm/Company)

6948 NW 50th Street

(Address)

Miami, Florida 33166

(City/State and Zip Code)

For further information concerning this matter, please call:

Francisco Bleischmidt

(Name of Contact Person)

at (305) 218-6931

(Area Code & Daytime Telephone Number)

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

☒ \$25 Filing Fee

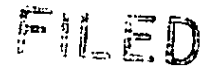
☐ \$55 Filing Fee & Certified Copy

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



2022 JUN 27 PM 1:04

TALLANAS 99.11

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**
(Pursuant to 605.0216, Florida Statutes)

- 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

CR21079 (2/14)