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2005 SEP 13 P 2:58

(Requestor's Name)

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2005 SEP 13 P 2:58

TO: Registration Section
Division of Corporations

SEC. DIV. OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Own Force Services LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ernesto Sanchez
(Name of Person)

(Firm/Company)

471 SW 8 Street
(Address)

Miami, FL 33130
(City/State and Zip Code)

For further information concerning this matter, please call:

Ernesto Sanchez at (305) 858-5652
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee &
Certified Copy



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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2005 SEP 13 P 2:58

TALLAHASSEE, FLORIDA

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Mauricio Esteban Paredes, hereby resign as Member Manager
(Title)

of Own Force Services LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of Florida,

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314