

LOS 0000 95448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

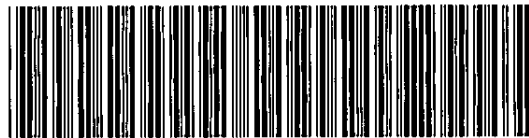
(Business Entity Name)

(Document Number)

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JUL 28 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MROZEK SERVICES GROUP, 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:

ADAM D MROZEK
(Contact Person)

MROZEK SERVICES GROUP, LLC
(Firm/Company)

7746 BRIDGESTONE DRIVE
(Address)

ORLANDO, FL 32835
(City/State and Zip Code)

For further information concerning this matter, please call:

ADAM D MROZEK at (407) 538-2038
(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

☐ \$55 Filing Fee & Certified Copy

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

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TALLAHASSEE, FLORIDA



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: MROZEK SERVICES GROUP, LLC

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

L05000095448

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/31/2015

4. I, MELANIE A MROZEK, 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]
Signature of Dissociating Member or Resigning Manager

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Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)



MROZEK SERVICES GROUP, LLC

213 S Dillard Street, Suite 250

Winter Garden, FL 34787

(407) 538-2038

(800) 283-8516 fax

December 31, 2015

Melanie A Mrozek
7746 Bridgestone Drive
Orlando, FL 32835

Mrozek Services Group, LLC
213 S Dillard Street, Suite 250
Winter Garden, FL 34787

RE: Departure from Mrozek Services Group, LLC

Gentlemen:

The intent of this letter is to act as notice that I no longer wish to be affiliated with Mrozek Services Group, LLC. I relinquish all my rights and authority as a member of Mrozek Services Group, LLC as of the date of this letter.

I thank you for your time and consideration in this matter.

Sincerely,

Melanie A Mrozek

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