

L 05 0000 95812

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

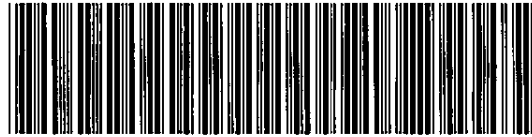
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600258122276

03/27/14--01004--014 **25.00

FILED
14 MAR 27 PM 4:01
RECEIVED

LLC
O/D Resign.

4-7-14

DL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACF Enterprises 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:

Joan Carroll-Flowers

(Contact Person)

ACF Enterprises LLC

(Firm/Company)

7715 Yardley Drive #208

(Address)

Tamarac, FL 33321

(City/State and Zip Code)

For further information concerning this matter, please call:

Joan carroll-Flowers

(Name of Contact Person)

at 954 724-5204

(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



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: ACF Enterprises LLC
2. The Florida document/registration number assigned to this limited liability company is: L05000095812
3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 15, 2014
4. I, Calvin L. Green Jr., hereby withdraw/resign as a
(Print Name of Person Resigning)
Managing Member
(Print Title)

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

x Calvin L. Green Jr.
Signature of Dissociating Member or Resigning Manager

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

FILED
14 MAR 27 PM 4:01