

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	‡)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Name)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates c	f Status
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		11.2/21
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COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: EINSTEIN & ASSOCIATES, LLC (Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to: Eric Willner (Contact Person) Einstein & Associates, LLC (Firm/Company) 900 N. Federal Hwy. Suite 210 Boca Raton, FL. 33432 (City/State and Zip Code) For further information concerning this matter, please call: Eric Willner (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: \$55 Filing Fee & /\\$25 Filing Fee Certified Copy **MAILING ADDRESS:** STREET/COURIER ADDRESS: Registration Section

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

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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

RESIGNATION OF THE FROM FLORIDA OR FOREIGN Law.

1. The name of the limited liability company as it appears on the records of the Florida Department State is: EINSTEIN & ASSOCIATES, LLC 3. The Florida document/registration number of this limited liability company is: L06000093210 4. I, Jeffrey Mills _, hereby resign as a MGR of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. ing Member, Managing Member or Manager Filing Fee: \$25.00 (Required)

Certified Copy:

\$30.00 (Optional)