

L07000092523

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

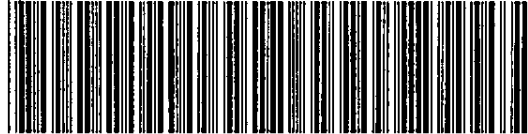
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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15 FEB 26 AM 10:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 27 2015

C. CARROTHER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Your Safe Driver Taxi 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:

Michael P. Solomon  
(Contact Person)

Taxi USA of Palm Beaches LLC. (Taxi, Taxi)  
(Firm/Company)

130 New 11<sup>th</sup> St Boca Raton  
(Address)

Fl.  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Solomon at (561) 222-3333  
(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



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)

FILED  
15 FEB 26 AM 11:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Your Safe Drivers Taxi LLC.

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

3700 Georgia Ave St# 23  
West Palm Beach Fl. 33405

2000 N. Florida mango  
West Palm beach Fl.  
33409

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Dec. 30, 2014

4. I, Raymond Venelus, hereby withdraw/resign as a  
(Print Name of Person Resigning)

mgrm / Owner.  
(Print Title)

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

Raymond Venelus  
Signature of Dissociating Member or Resigning Manager

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