## L08000080284

(Do	augstoria Nama)	
(Requestor's Name)		
-		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Consideration to Ellino Office		
Special Instructions to Filing Officer:		

Office Use Only



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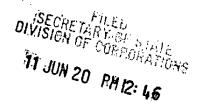
SECRETARY, OF SIMIL DIVISION OF CUAPORATIONS

## **COVER LETTER**

Division of Corporations	
SUBJECT: JOANGELO SERVICES	
(Name of Limited	Liability Company)
The enclosed member, managing member or m filing.	anager resignation and fee(s) are submitted for
Please return all correspondence concerning thi	is matter to:
JHON MORENO	
(Contact Person)	
JOANGELO SERVICES LLC	
(Firm/Company)	
7000 PINES BLVD	
(Address)	
PEMBROOKE PINES , FL 33024	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
JHON MORENO a	786 7095365
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t	he Florida Department of State for:
\$25 Filing Fee	\$55 Filing Fee &
<u> </u>	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)





## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as ANGELO SERVICES	it appears on the records of the Florida Department LLC
2. This limited liab	ility company was organized	under the laws of:
3. The Florida doc <u>L0800008</u>		this limited liability company is:
4. I, NIDIA GIL	'anne of Person Resigning)	, hereby resign as a MAGER MEMBER (Print Title)
	bility company and affirm the	e limited liability company has been notified of my
Judio.	Gel In.	
Signature of Res	gning Member, Managing M	ember or Manager
	\$25.00 (Required) \$30.00 (Optional)	