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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

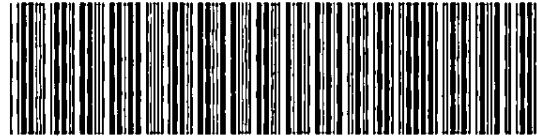
(Business Entity Name)

(Document Number)

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

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08/17/2021  
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2021 AUG -2 PM12:30  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

FILED

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FLORIDA LUXURY TRASPORTATION 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:

JULISSA ROSADO  
\_\_\_\_\_  
(Contact Person)

DCM SERVICES CENTER I NC  
\_\_\_\_\_  
(Firm/Company)

2529 W BUSCH BLVD STE 1000  
\_\_\_\_\_  
(Address)

TAMPA, FL 33618  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

JULISSA ROSADO at ( 813 ) 990-8630  
\_\_\_\_\_  
(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

Mailing Address:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FILED

2021 AUG -2 PM 12:30

SECRETARY OF STATE  
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: Florida Luxury Transportation, LLC

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

L10000002499

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/20/2021

4. I, LUIS CASTRO, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MGR

*(Print Title)*

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

*Luis Castro*  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)