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SECRETARY OF STATE TALLAHASSEE. FLORIDA

NOV 20 2014 T. CARTER

LLC MIMGR RESIST

## **COVER LETTER**

TO:

CR2E079 (2/14)

Registration Section Division of Corporations M&M AUTO ASSOCIATES LLC SUBJECT: (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: AL MESA (Contact Person) (Firm/Company) PO.BOX 570963 (Address) ORLANDO, FL 32857 (City/State and Zip Code) For further information concerning this matter, please call: AL MESA 407 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy □ \$25 Filing Fee 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



FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## 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)

	limited liability company as it appears on the records of the Florida Department AUTO ASSOCIATES LLC
	ment/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
MADIA M. C.	
MGRM	
	Print Title)
resignation in wr	bility company and affirm the limited liability company has been notified of my ting.  Sociating Member or Resigning Manager
	\$25.00 (Required) \$30.00 (Optional)