

L100000 48524

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

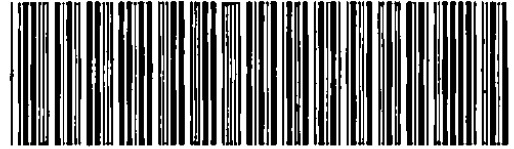
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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2019 SEP 16 AM 8:45  
FILING OFFICE  
TOLSON

Y SULKER

SEP 25 2019

Re:

HIREGY INTEGRATED SOLUTIONS LLC

L10000048524

801 NORTHPOINT PARKWAY SUITE 109

WEST PALM BEACH, FL 33407

561-721-6414

To whom it may concern:

Also remove the FEI/EIN # 82-2806011, when removing Ruth Maxwell. Carl Matthews will add the ne FEI/EIN # that he has applied for that will be attached to him. Thank you.

Kind Regards,

A handwritten signature in black ink that reads "Ruth Maxwell". The signature is written in a cursive, flowing style.

Ruth Maxwell

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Hiregy Integrated Solutions 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:

Ruth Maxwell

(Contact Person)

Hiregy Integrated Solutions LLC

(Firm/Company)

801 NorthPoint Parkway Suite 109

(Address)

West Palm Beach , FL 33407

(City/State and Zip Code)

For further information concerning this matter, please call:

Ruth Maxwell

at ( 561 ) 721-6414

(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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Hiregy Integrated Solutions LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L10000048524
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/26/2019
4. I, Ruth Maxwell, hereby withdraw/resign as a Authorized Member  
*(Print Name of Person Resigning)*  
*(Print Title)*

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

Ruth Maxwell

Signature of Dissociating Member or Resigning Manager

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