

LIO 000 105325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

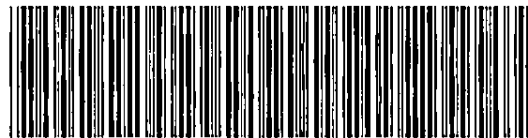
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200318025472

10/22/18--01013--026 \*\*25.00

FILED

2018 OCT 22 P 10:56

10/22/18

10/31/18 DS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A-1 GLOBAL SERVICES 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:

GUILLERMO DE HOWARTZ  
(Contact Person)

IN BALANCE ACCOUNTING SYSTEMS LLC  
(Firm/Company)

18459 PINES BLVD STE 222  
(Address)

PEMBROKE PINES  
(City/State and Zip Code)

For further information concerning this matter, please call:

GUILLERMO DE HOWARTZ at ( 305 ) 567-0363  
(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

FILED  
JAN 20 2022 PM 10:56



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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: A-1 GLOBAL SERVICES LLC

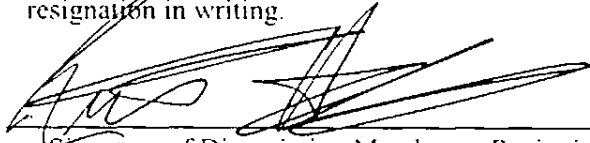
2. The Florida document/registration number assigned to this limited liability company is:  
L10000105325

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/15/2018

4. I, RYSZARD J HUDJUS, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

AUTHORIZED MEMBER  
*(Print Title)*

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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