LII 0000 45559

(Re	questor's Name)	
		. —
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	_
,		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		,

Office Use Only



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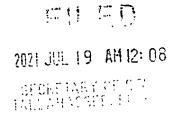
09/05/2021 JH

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COVER LETTER

TO:	_	stration Section ion of Corporations				
		·				
SUBJ	ECT:	HERTZCENTER LLC				
		(Name of Limited Liability Company)				
The er	nclosed	l member, resignation or diss	ociatic	on and fe	e(s) are submitted for filing.	
Please	e return	all correspondence concerni	ng this	matter t	to:	
THIER	RRY MA	ARTINEAU				
		(Contact Person)				
HERT	ZCENT	ER LLC				
		(Firm/Company)				
10907	SW 236	TERRACE				
		(Address)				
НОМЕ	ESTEAD	D. FLORIDA 33032				
		(City/State and Zip Code)				
For fu	irther ii	nformation concerning this m	atter, j	please ca	ıll:	
THIER	RRY MA	ARTINEAU	at	786 (430-7102	
	(N	lame of Contact Person)			ode & Daytime Telephone Number)	
Enclo	sed ple	ase find a check made payab	le to th	ne Florid	a Department of State for:	
□ \$2:	5 Filing	g Fee	=	\$55 Fil	ing Fee & Certified Copy	
	Mailii	ng Address:			Street Address:	
		stration Section			Registration Section	
		sion of Corporations			Division of Corporations	
		Box 6327			The Centre of Tallahassee	
	Talla	hassee, FL 32314			2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	





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)

	Elimited liability company as it appears on the records of the Florida Department TZCENTER LLC
2. The Florida doc	rument/registration number assigned to this limited liability company is:
3. The date this m	ember/manager withdrew/resigned or will withdraw/resign is:
OREGORY MA	
MGRM	
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)