## 41000089686

(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Business Linkly Name)							
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## **COVER LETTER**

Division of Corporations								
SUBJECT: West Palm Auto Wash 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:								
Edward Cruz (Contact Person)								
WPAW (Firm/Company)								
344 ENFIELD ST (Address)								
Boca Raton FL 33487 (City/State and Zip Code)								
For further information concerning this matter, please call:								
Edward Cruz at (561) 609 - 7932  (Name of Contact Person) (Area Code & Daytime Telephone Number)								
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum{\$\text{\$\sum{\$\text{25}}}\$ \ \text{Filing Fee} \text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{Filing Fee}}}\$ \$\text{\$\tex{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$								
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314								

Tallahassee, Florida 32301

CR2E079 (2/14)



## 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 liabil	ity company	as it appears	on the records	of the Florida	Departmen	nt
of State is:	West	Palm	Auto	Wash	LLC		. <b>.</b>
2. The Florida docu	ument/registra	ation number	r assigned to t	his limited liab	ility company	is:	
<u> L1100</u>	000 89	686					
3. The date this me	ember/manage	er withdrew/i	resigned or wi	ill withdraw/re	sign is: 11.	23-1	6
4. I, Edwar (Print N	d Cf	202 Resigning)	, here	by withdraw/re	esign as a		
	(Print Title)						
of this limited lia resignation in wr		y and affirm	the limited li	ability compan	y has been no	3.E.C.	y
	Mz					17 JAH -3	E
Signature of Di	issociating M	ember or Re	signing Mana	ger		PH	
Filing Fee: Certified Copy:	\$25.00 (R \$30.00 (C					1: 22	