L12000008352H

(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: + CUSTOMER GAL ME PAMOS. 10 Change Make TH
to change inde. TH J. HORNE
MAR - 7 2022

Office Use Only



400382083244

02/25/22--01011--000 **25.00

FILED
2022 FEB 25 AM 9: 45

COVER LETTER

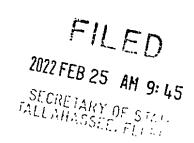
Division of Corporations Right Now Air Solutions LLC SUBJECT: (Name of Limited Liability Company) The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Alejandro Vidal (Contact Person) Right Now Air Solutions LLC (Firm/Company) 7327 NW 54th St (Address) Miami, Fl 33166 (City/State and Zip Code) For further information concerning this matter, please call: Alejandro Vidal 786 at ((Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303

TO:

Registration Section







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
of State is:	Now Air Solutions LLC
2. The Florida doc: 1.12000083524	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 1 12 22
4.1, Jose V	, hereby withdraw/resign as a large of Person Resigning)
Member	
	(Print Title)
of this limited lia resignation in vy	Bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)