

L120000084675

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

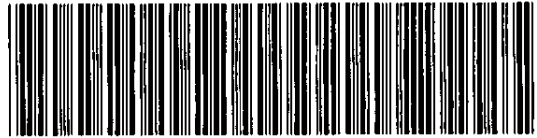
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/18/16--01003--009 **25.00

FILED
CLERK OF DISTRICT COURT
16 OCT 17 AM 11:01

OCT 18 2016
J. HARRIS

VOLPINI & ASSOCIATES

955 WEST ST. CLAIR AVENUE
CRITTENDEN COURT, SUITE 215
CLEVELAND, OHIO 44113
PHONE: (216) 367-5665
FAX: (216) 367-5667

October 14, 2016

Secretary of the State of Florida
Registration Section:
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Dissociation of Resignation of Member, Manager
from Florida or Foreign Limited Liability Company
for Michelle Zemla

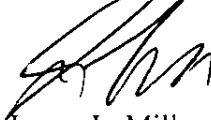
Dear Sir/Madam,

Enclosed please find:

1. A cover letter; and
2. An executed form for Dissociation of Resignation of Member, Manager from Florida or Foreign Limited Liability Company for Clearwalling, LLC, Registration No. L12000084675 for Michelle Zemla; and
3. Check No. 1539 in the amount of \$25.00 (Twenty-Five Dollars) for the filing fee.

If you have any questions regarding any of the enclosures, do not hesitate to contact me.

Very truly yours,



James L. Miller

JLM/dlu
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clearwalling, 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:

James L. Miller

(Contact Person)

Volpini & Associates

(Firm/Company)

75 Public Square, Ste. 1310

(Address)

Cleveland, Ohio 44113

(City, State and Zip Code)

For further information concerning this matter, please call:

James L. Miller

(Name of Contact Person)

at (440) 476-4875
(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

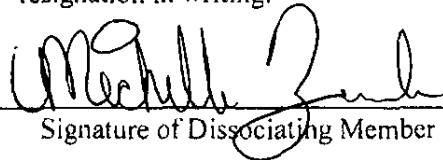


FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**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: CLEARWALLING, LLC
2. The Florida document/registration number assigned to this limited liability company is:
L12000084675
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/14/2016
4. I, MICHELLE ZEMLA, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGING MEMBER (MGRM)
(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)

FILED
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
16 OCT 17 AM 11:01