# L12000117935

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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C. LEWIS

AUG 8 2014

EXAMMER

#### **COVER LETTER**

Division of Corporations
SUBJECT: North American Recyclers, 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:
Maikel Basuto (Contact Person)
North American Recyclers, LLC (Firm/Company)
5748 Dewey St.
Holly wood, FC 3-3023 (City/State and Zip Code)
For further information concerning this matter, please call:
Maikel Basulto at (786) 307-8781  (Name of Contact Person) (Area Code & Daytime Telephone Number)
(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{\$\text{\$\text{25}} Filing Fee}}\$\$ \$\sum_{\$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\$\text{\$\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex{

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:** 

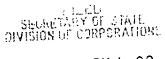
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)

TO:

Registration Section





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### 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:	orth American Recyclers, LLC
2. The Florida docu	ament/registration number assigned to this limited liability company is:
<u>L1200</u>	0117935
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 5 7 2014
	which withdraw/resign as a many serious and serious an
MGR	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
	108V.
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)
Lemmed Conv.	N (CLUB) (CINGODAL)