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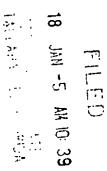
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Beemees Emily Flame)						
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						

Office Use Only



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COVER LETTER

Registration Section

Division of Corporations

TO:

SUBJECT: A Cade my Tax, and Car Service ((C) (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:
Severio J. Carvano JR (Contact Person)
(Firm/Company)
3 Colts Run (Address)
Marlboro NJ 07746 (City/State and Zip Code)
For further information concerning this matter, please call:
Severic (Grunno JR 31 (908) 377-0285 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\square\$ \$\\$55\$ Filing Fee & Certified Copy

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

CR2E079 (2/14)

Registration Section

Clifton Building

Division of Corporations

2661 Executive Center Circle

Tallahassee, Florida 32301

STREET/COURIER ADDRESS:



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 t	he Florida D	epartme	ent
of State is:	Icademy Taxi and	1 Cac	Service	LL	<u>(.</u>
2. The Florida doct	ument/registration number assigned to the	his limited liability	y company is	; :	
<u>L130</u>	00014410				
3. The date this me	mber/manager withdrew/resigned or wi	II withdraw/resign	n is: <u>/2/3</u>	1/20	2/1
4.1, Severi	OJCANUNOJR, herel lame of Person Resigning)			,	
Manac	Print Tile)				
resignation in wr	Maino Mr.		as been notifi	ied of m	ny
Signature of Di	ssociating Member or Resigning Manag	ger	:		TI,
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		<u></u>	-5 M ID: 3	