

L13 0000021628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

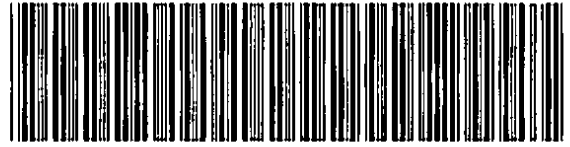
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OFFICE OF THE
CLERK OF SUPERIOR COURT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ABS Wellness 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:

Gregory A. Gordillo

(Contact Person)

The Gordillo Law Firm

(Firm/Company)

700 S. 9th Street

(Address)

Las Vegas, NV 89101

(City/State and Zip Code)

For further information concerning this matter, please call:

Gregory Gordillo

(Name of Contact Person)

702

802-6845

at (_____) _____

(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

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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Division of Corporations
Tallahassee, FL 32303



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: ABS Wellness LLC

2. The Florida document/registration number assigned to this limited liability company is:

L13000021628

3. The date this member/manager withdrew/resigned or will withdraw/resign is: May 31, 2022

4. I, Ashley Drummonds, hereby withdraw/resign as a
(Print Name of Person Resigning)

Manager and a Member

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of
resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

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Division of Corporations
State of Florida