

L130000064187

\_\_\_\_\_  
(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:

\_\_\_\_\_

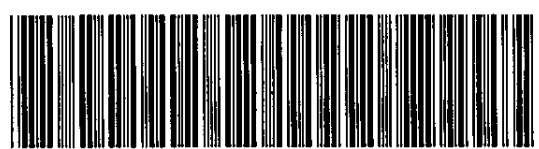
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Office Use Only



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OCT 07 2014  
T. CARTER

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
14 SEP 24 PM 3:55

LLC Member Resign

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Expert Repairs 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:

Chad See  
(Contact Person)

Expert Repairs LLC  
(Firm/Company)

851 Robbins St  
(Address)

West Palm Beach, FL, 33405  
(City/State and Zip Code)

For further information concerning this matter, please call:

Chad See at (561) 932-2600  
(Name of Contact Person) (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



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 SEP 24 PM 3:55

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: Expert Repairs LLC

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

L13000064187

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/15/14

4. I, Kenneth S Urban, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MG R  
(Print Title)

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

Kenneth S Urban  
Signature of Dissociating Member or Resigning Manager

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