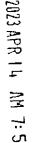
L1300076210

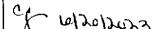
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



300406082233



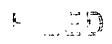


COVER LETTER

Divi	sion of Corporations			
SUBJECT:	MERCANDO CONSULTING G	ROUP LLC		
3013017017	(Name of Limited Liability Company)			
The enclose	ed member, resignation or disc	sociation and fee	e(s) are submitted for filing.	
Please retur	n all correspondence concern	ing this matter to	o:	
FRANK MEE	RCANDO			
	(Contact Person)	-		
MERCANDO	CONSULTING GROUP LLC			
	(Firm/Company)			
500 SOUTH	AUSTRALIAN AVE			
	(Address)			
WEST PALM	1 BEACH, FL 33401			
	(City/State and Zip Code)			
For further	information concerning this n	natter, please cal	11:	
FRANK MEI	RCANDO	561 at (600-9400	
(1	Name of Contact Person)	(Area Co	de & Daytime Telephone Number)	
-	lease find a check made payal			
□ \$25 Filir	ng Fee	≡ \$55 Fili	ing Fee & Certified Copy	
	ing Address:		Street Address:	
	istration Section		Registration Section	
	ision of Corporations . Box 6327		Division of Corporations The Centre of Tallahassee	
	ahassee, FL 32314		2415 N. Monroe Street, Suite 810	
Tananassee, FL 32314			Tallahassee, FL 32303	

TO: Registration Section





2023 APR 14 AM 7:55

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)

	limited liability company as	s it appears on the records of the Florida Department
2. The Florida doc	ument/registration number a	ssigned to this limited liability company is:
-1,1300007610	L13000076210	
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:
4. I.		, hereby withdraw/resign as a
(Print)	lame of Person Resigning)	,
MEMEBER		
	(Print Title)	
of this limited lia resignation in wi		ne limited liability company has been notified of my
Valle	1 Depusit	(
Signature of D	issociating Member or Resig	gning Manager
	\$25.00 (Required)	
Centilied Copy:	\$30.00 (Optional)	