# L13000094026

(Re	equestor's Name)	<del></del>
(Ad	ldress)	
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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: SCCO OIL 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:
ILIAND L. Hernandez (Contact Person)
(Firm/Company)
7428 SW 16 ST (Address)
Migmi, Fl. 33155 (City/State and Zip Code)
For further information concerning this matter, please call:
TLIAND L. Hernandez (305) 323-436 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sim \\$25 \text{ Filing Fee & Certified Copy}\$

#### STREET/COURIER ADDRESS:

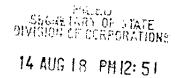
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:** 

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

CR2E079 (2/14)





### 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 lin	mited liability company as it appears on the records of the Florida Department
of State is:	Seco 911 LLC
2. The Florida docum	nent/registration number assigned to this limited liability company is:
L130000	04026
3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is: May, 13 <sup>th</sup> 2014
4.1, ILIAND	L HOODCZ, hereby withdraw/resign as a ne of Person Resigning)
<u>Ti+le</u>	MGRM.
of this limited liabil resignation in writi	lity company and affirm the limited liability company has been notified of my ng.
Dean 4	I. Hrvaale
Signature of Diss	ociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)