## 13000111314

| (Re                                     | equestor's Name)   |                 |
|---|--------------------|-----------------|
| (Ad                                     | Idress)            |                 |
| (Ad                                     | ldress)            |                 |
| (Cit                                    | ty/State/Zip/Phone | <del>= #)</del> |
| PICK-UP                                 | ☐ WAIT             | MAIL            |
| (Bu                                     | siness Entity Nar  | ne)             |
| (Document Number)                       |                    |                 |
| Certified Copies                        | _ Certificates     | of Status       |
| Special Instructions to Filing Officer: |                    |                 |
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## **COYER LETTER**

| TO:    | Registration Section Division of Corporations     | . <del>.</del> .      |   |
|--------|---|-----------------------|---|
| SUBJ   |   |                       |   |
|        | (Name of L  | limited Liability Cor | npany)  |
| The er | nclosed member, resignation or disso              | ociation and fee(s    | s) are submitted for filing.                    |
| Please | e return all correspondence concernir             | ng this matter to:    |   |
| Sally  | Bush  |                       |   |
|        | (Contact Person)                                  |                       | _   |
| Shaw   | v's Central Florida Service LLC                   |                       |   |
|        | (Firm/Company)                                    | · ·-                  | <del>-</del>                                    |
| 244 N  | N. Jungle Rd                                      |                       |   |
|        | (Address)   |                       | _   |
| Gene   | eva, FL 32732                                     |                       |   |
|        | (City/State and Zip Code)                         | <del></del>           | _   |
| For fu | orther information concerning this ma             | atter, please call:   |   |
| Sally  | Bush  | <b>407</b> at (       | 349-5724  |
|        | (Name of Contact Person)                          | <del></del>           | & Daytime Telephone Number)                     |
|        | sed please find a check made payable 5 Filing Fee |                       | Department of State for: g Fee & Certified Copy |
|        | EET/COURIER ADDRESS:                              |                       | MAILING ADDRESS:                                |
| _      | tration Section ion of Corporations               |                       | Registration Section Division of Corporations   |
|        | n Building  |                       | P.O. Box 6327                                   |
|        | Executive Center Circle                           |                       | Tallahassee, Florida 32314                      |
|        | nassee, Florida 32301                             |                       |   |

CR2E079 (2/14)



October 12, 2019

SALLY BUSH 244 N. JUNGLE RD GENEVA, FL 32732

SUBJECT: SHAW'S CENTRAL FLORIDA SERVICE LLC

Ref. Number: L13000111314

We have received your document for SHAW'S CENTRAL FLORIDA SERVICE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to list the date of resignation in the space provided.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 719A00021026

Irene Albritton Regulatory Specialist II





## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

|   | e limited liability company as it appears on the records of the Florida Department w's Central Florida Service LLC |
|---|--|
| 2. The Florida doc<br>L1300011131       | ument/registration number assigned to this limited liability company is:   |
| 3. The date this m                      | ember/manager withdrew/resigned or will withdraw/resign is:  |
| 4. I, Frans                             | Sico Rodriguez, hereby withdraw/resign as a  |
| MGRM                                    |  |
|   | (Print Title)  |
| of this limited lia<br>resignation in w | ability company and affirm the limited liability company has been notified of my ring.                             |
| Signature of D                          | issociating Member or Resigning Manager  |
| Filing Fee:<br>Certified Copy:          | \$25.00 (Required)<br>\$30.00 (Optional)   |