## 113000 165595

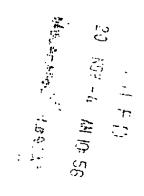
(Requ	estor's Name)				
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(City/S	State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
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Certified Copies	Certificates	of Status			
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T. LEWISUX

## **COVER LETTER**

TO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	Evergreen Electronic Recycling LL	С	
	(Name of Li	nited Liability Co	mpany)
The enclosed	I member, resignation or dissoc	ciation and fee(	s) are submitted for filing.
Please return	all correspondence concerning	g this matter to:	
Claude B. Huts	son		
	(Contact Person)		_
	(Firm/Company)		_
21 E Evans Str	reet		
	(Address)		_
Orlando, FL 3	2804		
	(City/State and Zip Code)		_
For further is	nformation concerning this mat	ter, please call:	
Claude Hutson		407 at (	247-2407
(N	ame of Contact Person)		e & Daytime Telephone Number)
Enclosed ple	ase find a check made payable	to the Florida I	Department of State for:
□ \$25 Filing	g Fee	■ \$55 Filin	g Fee & Certified Copy
	ng Address: stration Section		Street Address: Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
	hassee, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303

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)

	limited liability company as it	appears on the records o	of the Florida D	epartn	nent 
2. The Florida doc L13000165595	ument/registration number assig	gned to this limited liabi	ility company is	5:	
Clauda D. Hussa	mber/manager withdrew/resign n Tame of Person Resigning)		-	7, 2020	
	(Print Title) bility company and affirm the liting.	imited liability company	y has been notif	fied of	my
Signature of De	ssociating Member or Resignin \$25.00 (Required)	g Manager		20 777 -4 /出	i i
Certified Copy:	\$30.00 (Optional)		215 177 187	ත ආ	•