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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Worldwide Trailer (Name of Limited Liability Con	npany)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:	
Jerry Monto De Ono Sn. (Contact Person)	-
Worldwide Trailer LLC (Firm/Company)	-
19175 N. Dale Mabry Huy	_
Lutz, F 33548 (City/State and Zip Code)	- 20. SI
For further information concerning this matter, please call:	ETALLAH
Try L Mobbe Conference at (8)3 (Name of Contact Person) (Area Code	& Daytime Telephone Number)
Epolosed please find a check made payable to the Florida D \$25 Filing Fee \$55 Filing	· <u>~</u> .
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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 of the Florida Department
of State is:	Dornwide Trailer LLC
2. The Florida docu	ument/registration number assigned to this limited liability company is:
115000	039545
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: $08/16/20$ 24
4. I, Michael (Print N	Jame of Person Resigning), hereby withdraw/resign as:a
Manag	AAR (Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Mich	rel Clar
Signature of Di	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)