## L150000 64215

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





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08/19/19--01012--013 \*\*25.00

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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Atlas O.E, LLC				
(Name of I.	imited Liability C	ompany)		
The enclosed member, resignation or disso	ociation and fee	(s) are submitted for fi	iling.	
Please return all correspondence concernir	ng this matter to	i:		
Thomas S. Dolney				
(Contact Person)	<del></del>			
Small Business Counsel				
(Firm Company)		_		
214 S. Park Ave., Ste. B				
(Address)				
Winter Park, FL 32789			5-14 Jul 10	
(City/State and Zip Code)		<del>_</del>	1	
For further information concerning this ma	atter, please cal	l:	- . ɔ	
Marlene Durand	407	621-4200	> o	
(Name of Contact Person)		le & Daytime Telephone		
Enclosed please find a check made payable \$25 Filing Fee		Department of State for the State for the State for the State of the S		
STREET/COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section Division of Corporations		Registration Section		
Clifton Building		Division of Corporations P.O. Box 6327		
2661 Executive Center Circle		Tallahassee, Florida 32314		
Tallahassee, Florida 32301				

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)

2. The Florida document/registration number assigned to this limited liability company is:  L15000064215  3. The date this member/manager withdrew/resigned or will withdraw/resign is:  Osniel Almora  (Print Name of Person Resigning)  Manager and Member  (Print Title)  of this limited liability company and affirm the limited liability company has been notified resignation in writing.  Signature of Dissociating Member or Resigning Manager	·
Manager and Member  (Print Title)  of this limited liability company and affirm the limited liability company has been notified resignation in writing.	
Manager and Member  (Print Title)  of this limited liability company and affirm the limited liability company has been notified resignation in writing.	118
Manager and Member  (Print Title)  of this limited liability company and affirm the limited liability company has been notified resignation in writing.	
of this limited liability company and affirm the limited liability company has been notified resignation in writing.	. 1
of this limited liability company and affirm the limited liability company has been notified resignation in writing.	. 1
resignation in writing.	9
Signature of Dissociating Member or Resigning Manager	of my
Signature of Dissociating Member or Resigning Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	