

L15000104014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

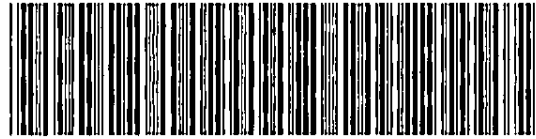
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900362892309

03/23/21--01035--006 \*\*25.00

FILED  
MAR 23 2021  
PM 3:59  
FBI - JEFFERSON

JUN 10 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PROJECT ON CALL 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:

Alberto J. Calderin

(Contact Person)

PROJECT ON CALL LLC

(Firm/Company)

2950 SW 109 AVE.

(Address)

MIAMI, FL 33165

(City/State and Zip Code)

For further information concerning this matter, please call:

Alberto J. Calderin

at (305) 910-3341

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: PROJECT ON CALL LLC

2. The Florida document-registration number assigned to this limited liability company is:  
L15000104014

3. The date this member-manager withdrew/resigned or will withdraw/resign is: 9/16/2015

4. I, Virginia Mirabal, hereby withdraw resign as a AMBR  
*(Print Name of Person Resigning)*  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Virginia Mirabal  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)