

L15000137038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

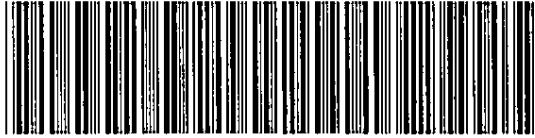
(Business Entity Name)

(Document Number)

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JAN 22 2018

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JAN 22 PM 2:05

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JAN 24 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AEGEAN MOTORS 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:

Dean Markis  
(Contact Person)

Aegean Mortors, LLC  
(Firm/Company)

4696 Lucerne Lakes Blvd. East 104  
(Address)

Lake Worth Florida 33467  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dean Markis at ( 561 ) 317-0824  
(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

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



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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:           Aegean Motors, LLC          

2. The Florida document/registration number assigned to this limited liability company is:  
          L15000137038          

3. The date this member/manager withdrew/resigned or will withdraw/resign is:           1/1/2018          

4. I,           Michael Margaritoff          , hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

          Member            
*(Print Title)*

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

          *Michael Margaritoff*            
Signature of Dissociating Member or Resigning Manager

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