

LIS600150876

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

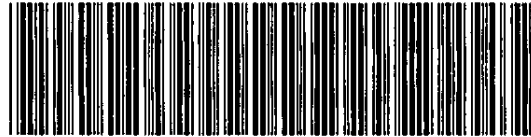
(Document Number)

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TALLAHASSEE, FLORIDA

2018 APR 16 A 11:43

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: com-ESCO, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Denial and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Modica

Name of Person

com-ESCO, LLC

Firm/Company

10 Fairway Drive, Suite 141V

Address

Deerfield Beach, FL 33441

City/State and Zip Code

mike@com-esco.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Modica

Name of Person

at (561)

Area Code

523-0762

Daytime Telephone Number

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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STATEMENT OF DENIAL

Pursuant to section 605.0303, Florida Statutes, I hereby submit the following statement of denial:

FIRST: The name of the limited liability company is: com-ESCO, LLC

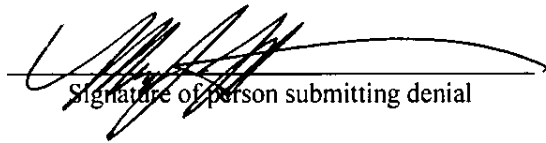
SECOND: The document number of this limited liability company is: L15000150876

THIRD: The statement of authority to which this statement of denial pertains is: _____

Neither Robert Kinssies nor Energy Solutions Worldwide are Members of, or in any

other way now affiliated with, com-ESCO, LLC.

and this grant of authority is denied.


Signature of person submitting denial

Michael Modica

Typed or printed name of signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

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TALLAHASSEE, FLORIDA

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