

LS000209665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

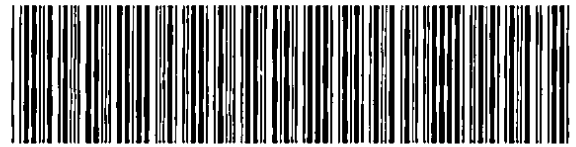
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Walter



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2018

JOHN WAGNER
130 MARTIN AVE
GREENACRES, FL 33463

SUBJECT: J WAGNER "LLC"
Ref. Number: L15000209685

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We have received your document for J WAGNER "LLC", however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 518A00020676

RECEIVED

OCT 15 2018



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: J WAGNER "LLC"

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

L15000209685

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/25/2018

4. I, MAIRA, GAETANO JOSEPH, 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.

G. MAIRA
Signature of Dissociating Member or Resigning Manager

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