11600009012

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
Certified Copies
Special Instructions to Filling Officer:

Office Use Only



10/11/17--01005--017 **25.00

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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: <u>SOUTHERN APPLIANCES AND RETAIRS, LLC</u>.

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

L1600009012

3. The date this member/manager withdrew/resigned or will withdraw/resign is: <u>october 4</u>, 2017

4.1. JUAN JUGO	, hereby withdraw/resign as a
(Print Name of Person Resigning)	

MEMBER/MANALOER.

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

Signature of Dissociating Member or Resigning Manager-

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

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: SOUTHERN APPLIANCES AND REPAIRS, LLC (Name of Corporation)

DOCUMENT NUMBER: L 1600009012

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

SAFTOS + COMPANY, 7.A. (Name of Firm/Company)

$$\frac{25}{(\text{Address})} \leq E \text{ and } \text{AVENUE}^{\#/235}$$

For further information concerning this matter, please call:

<u>Marko SASTOR</u> (Name of Person) at (<u>305</u>)<u>371-5252</u> (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations 2664 Executive Center Circle Tallahassee, FL 32301 TT OCT IO AN 7:21 SEGRETARY OF STATE ALLAHASSEE FLORID