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**L16000030583**

Koutoulas & Relis, LLC 954-332-1346

1/3

Division of Corporations

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : KOUTOULAS & RELIS, LLC  
Account Number : 120070000005  
Phone : (954)332-1345  
Fax Number : (954)332-1346

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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DEPARTMENT OF  
DIVISION OF CORP  
CORPORATIONS

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ITAUTOMATION, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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JUL 11 2018

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Corporate Filing Menu

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Fax Audit # H180002008063

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Itautomation 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:

Ursula Atkinson

(Contact Person)

Koutoulas & Relis LLC

(Firm/Company)

1776 N Pine Island Road Ste 315

(Address)

Plantation FL 33322

(City/State and Zip Code)

For further information concerning this matter, please call:

Ursula Atkinson

(Name of Contact Person)

at 954 332-1345  
(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

CR2E079 (2/14)

Fax Audit # H180002008063

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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: Automation LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L16000030583
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/01/2018
4. I, Lourens Poorter, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Authorized Member  
*(Print Title)*

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)

18 JUL 11 AM 2:49

Fax Audit # H180002008063