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## **COVER LETTER**

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: Legacy Motor Sales, LLC	
(Name of Lin	nited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
William Potwin	
(Contact Person)	
Legacy Motor Sales, LLC	
(Firm/Company)	
14900 US HWY 301	
(Address)	<del></del>
Dade City, FL 33523	·
(City/State and Zip Code)	,
For further information concerning this mat	ter, please call:
William Potwin	352 523-2000
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee	to the Florida Department of State for:  \$\square\$\$ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (2/14)



## 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)

	limited liability company as acy Motor Sales, LLC	it appears on the records of the Florida Depa	irtment
2. The Florida docs L1600006641		signed to this limited liability company is:	PH 2:2
Gerald Marc	um	gned or will withdraw/resign is: 04/30/201, hereby withdraw/resign as a	7 ——
AMBR	(Print Title)		
resignation in wr		e limited liability company has been notified	of my
	ssociating Member or Resign	uing Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		