

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L16000074573

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

From:
Account Name : ACCOUNT BOOKKEEPING CORP
Account Number : I20120000055
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CONTROL @ ABK CORP.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
CUSTOM CABINETRY OF WINDERMERE LLC

Certificate of Status	0
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Page Count	01
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CUSTOM CABINETRY OF WINDERMERE 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:

JULIA TEDESCO

(Contact Person)

ACCOUNT BOOKKEEPING CORP

(Firm/Company)

5301 CONROY ROAD SUITE 140

(Address)

ORLANDO, FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

JULIA TEDESCO

(Name of Contact Person)

at (407)

898-1757

(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

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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: CUSTOM CABINETRY OF WINDERMERE LLC

2. The Florida document/registration number assigned to this limited liability company is:
L16000074573

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/27/2019

4. I, ALINE MACIEL MOURA CORREA, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGR

(Print Title)

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

Aline Maciel Moura Correa
~~Signature of Dissociating Member or Resigning Manager~~

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