

L16 000145646

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

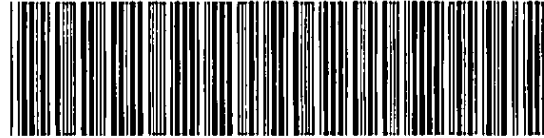
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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08/12/21--01022--016 \*\*25.00

08/24/2021  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 AUG 12 AM 11:14

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Signature Services of the Palm Beaches, 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:

Frank Gavin

\_\_\_\_\_  
(Contact Person)

Signature Services of the Palm Beaches LLC

\_\_\_\_\_  
(Firm/Company)

301 Yamato Road Suite 1240

\_\_\_\_\_  
(Address)

Boca Raton Florida 33431

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Frank Gavin

at ( 561 ) 262-9740  
\_\_\_\_\_  
(Name of Contact Person) (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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2021 AUG 12 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: Signature Services of the Palm Beaches, LLC

2. The Florida document/registration number assigned to this limited liability company is:  
81-3716456

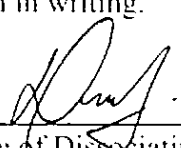
3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 1st 2021

4. I, Henrique Pereira, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Managing 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)