

L16000 162287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

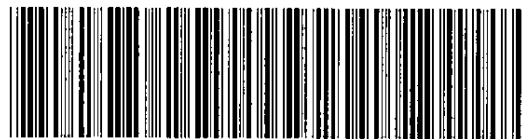
(Business Entity Name)

(Document Number)

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

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Office Use Only



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07/05/17--01013--002 \*\*25.00

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17 JUL -5 AM 11:51  
CLERK OF SUPERIOR COURT  
STATE OF ILLINOIS  
JUL 05 2017

S. WARREN

JUL 07 2017

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cable & Wire Solutions 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:

Jhojan Munoz / Guillermo Fernandez  
(Contact Person)

Cable & Wire Solutions LLC  
(Firm/Company)

15618 SW 61 Ter  
(Address)

MIAMI FL 33193  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jhojan Munoz at ( 407 ) 5064125  
(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

### 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



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: Cable & Wire Solutions LLC

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

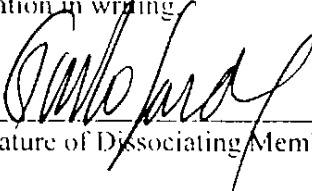
81-3822325

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6-1-17

4. I, Guillermo Fernandez, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Manager  
(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)

FILED  
17 JUL -5 AM 11:51  
DIVISION OF CORPORATIONS  
FLORIDA