

10/24/2016

Division of Corporations

**L16000183530**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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(((H16000262045 3)))



H16000262045ABC

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

From: Account Name : UNION HSA LLC  
Account Number : I20150000070  
Phone : (954)770-6227  
Fax Number : (954)369-4446

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

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

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
EAST COAST POOL SERVICE LLC**

Certificate of Status	0
Certified Copy	0
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Corporate Filing Menu

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D. SCOTT

OCT 25 2016



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: East Coast Pool Service LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L16000183530
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/21/2016
4. I, Shella Veloso, 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.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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