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## COVER LETTER

TO: Registration Section Division of Corporations Core Title Services, LLC SUBJECT: (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: Hemant Panchal (Contact Person) Core Title Services, LLC (Firm/Company) 500 Winderley Place, Ste 100 (Address) Maitland, FL 32751 (City/State and Zip Code) For further information concerning this matter, please call: Hemant Panchal (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 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)

	limited liability company as it appears on the records of the Florida Department
of State is:	Title Services, LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
2. The data this	03/01/2020
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 03/01/2020
4. I, Justin Clark	, hereby withdraw/resign as a
	iame of Person Resigning)
Manager	Jak Clark
	Print City
of this limited lia	bility company and affirm the limited liability company has been notified of my
resignation in wr	
// _	
Signature of 1)	issociating Member or Resigning Manager
Filing ree:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)