

LIG 000224106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

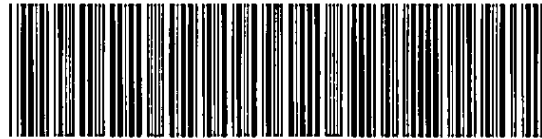
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800348994378

RECEIVED  
JUL 27 2020

07/28/20--01009--031 \*\*25.00

FILED  
2020 JUL 27 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FL

JA 09/21/20

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JORDY TIRE SERVICES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DULCE M YANES ZUNIGA

Name of Person

JORDY TIRE SERVICES LLC

Firm/Company

3703 STATE ROAD 574

Address

PLANT CITY FL 33563

City/State and Zip Code

lucymartinez1661@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GLORIA VELEZ

Name of Person

321

at (

347-9528

Area Code & Daytime Telephone Number

**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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)



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: JORDY TIRE SERVICES LLC

2. The Florida document/registration number assigned to this limited liability company is:  
LL16000224106

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 08/01/2020

4. I, MELVIN MARTINEZ, 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.

Mr. Melvin Martinez  
Signature of Dissociating Member or Resigning Manager

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

CR1E079 (2-14)

**FILED**  
2020 JUL 27 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FL