

L170000 66775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

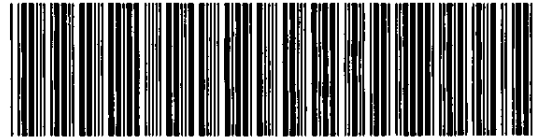
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700306450417

04/30/18--01016--011 \*\*25.00

18 APR 30 2018  
TALLAHASSEE, FLORIDA

JEFFGETT  
MAY 02 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Uamosa's Renovations 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:

Erick Chang  
(Contact Person)

Uamosa's Renovations LLC  
(Firm/Company)

401 SW 18<sup>th</sup> Apt 25  
(Address)

Miami FL 33135-3454  
(City/State and Zip Code)

For further information concerning this matter, please call:

Erick Chang at ( 305 ) 399 5029  
(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: Llamosa's Renovations LLC

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

C 17000066775

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 04/20/2018

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

Agent  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]  
Signature of Dissociating Member or Resigning Manager

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