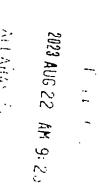
L17000142617

(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:



800414311588

08/22/23--01020--006 **25.00



Office Use Only



COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: PREMIER WASTE SPECIALISTS	uc
	nited Liability Company)
`	, , ,,
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Places estima all semanandones con consiste	this matter to
Please return all correspondence concerning	guns matter to:
Carmen Franco	
(Contact Person)	
PREMIER WASTE SPECIALISTS, LLC	
(Гігт/Сопралу)	
44050 000 450 01 405	
14952 SW 158 PLACE	
(Address)	
AMALII ELOOIDA 20400	
MIAMI, FLORIDA 33196 (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Carmen Franco	at (786) 985-5457
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
, ,	· · · · · · · · · · · · · · · · · · ·
Enclosed please find a check made payable	
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
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
	Taliahassee, FL 32303

CR2E079 (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: PREM	MIER WASTE SPECIALISTS, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L17000142617	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: Aug. 18, 2023
4. I, Carmen Franco	, hereby withdraw/resign as a
(Print N	ame of Person Resigning)
Manager	
	Print Title)
of this limited lial resignation in wr	polity company and affirm the limited liability company has been notified of my iting.
Signature of Di	ssociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)