## 117000202766

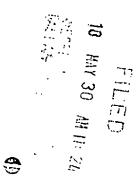
(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
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(Document Number)				
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
Inside & Out Southern Solu-SUBJECT:	tions, LLC	
	nited Liability Cor	прапу)
The enclosed member, resignation or dissoc	iation and fee(s	s) are submitted for filing.
Please return all correspondence concerning	this matter to:	
Thomas D. Adams		
(Contact Person)		_
Inside & Out Southern Solutions, LLC		
(Firm/Company)		-
2815 Gary Lane		
(Address)		_
Lakeland, Florida 33812		
(City/State and Zip Code)		_
For further information concerning this matt	ter, please call:	
Thomas D. Adams	863	944-4775
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee		Department of State for: g Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section		Registration Section
Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314

Tallahassee, Florida 32301

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)

	ed liability company as it a  Out Southern Solutions,	appears on the records of the Florida Department
2. The Florida document L17000202766	/registration number assig	ned to this limited liability company is:
3. The date this members	/manager withdrew/resigno	ed or will withdraw/resign is:
, Christopher A. Co	uahlin	_, hereby withdraw/resign as a
AR	6 6	
(Print	Title)	
resignation in writing.	company and affirm the li	mited liability company has been notified of my
Signature of Dissocia	ating wiemoer of Resigning	g Manager
<del>-</del>	25.00 (Required) 30.00 (Optional)	