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S. YOUNG

## **COVER LETTER**

TO:

CR2E079 (2/14)

Registration Section

**Division of Corporations** Premier Contract 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: Michael Scionti (Contact Person) Premier Contract Services LLC (Firm/Company) 3421 Gray Court (Address) Tampa, FL 33609 (City/State and Zip Code) For further information concerning this matter, please call: Michael Scionti (Area Code & Daytime Telephone Number) (Name of Contact Person) 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: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



## 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)

	e limited liability company as it appears on the records of the Florida Department mier Contract Services LLC
2. The Florida doc	ument/registration number assigned to this limited liability company is:
L1700020549	6
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I.	
	Name of Person Resigning)
AMBR	
	(Print Title)
of this limited lia resignation in wi	bility company and affirm the limited liability company has been notified of my iting.
M	
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)