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	gistration Section vision of Corporations		
D.	vision or corporations		
SUBJECT	CollectTek Solutions, LLC		
	- · <u> </u>	nited Liability Com	pany)
The enclos	sed member, resignation or dissoc	eiation and fee(s)	are submitted for filing.
Please retu	urn all correspondence concerning	this matter to:	
Carol Jot	tham		
	(Contact Person)		•
	(Firm/Company)		-
4280 Ma	deira Court		
	(Address)	<u> </u>	-
Sarasota	ı, FL 34233		
	(City/State and Zip Code)		-
For furthe	r information concerning this mat	ter, please call:	
Carol Jos	tham	941 at (539-7170
	(Name of Contact Person)		& Daytime Telephone Number)
	please find a check made payable ing Fee		epartment of State for: Fee & Certified Copy
Registration Division of Clifton Bu 2661 Exec	COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, 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 FR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

2. The Florida document/registration number assigned to this limited liability company is: L17000232199 3. The date this member/manager withdrew/resigned or will withdraw/resign is: L12-31-18 4. I, Carol Jotham , hereby withdraw/resign as a (Print Name of Person Resigning) Manager (Print Title)
4. I,, hereby withdraw/resign as a, hereby withdraw/resign as a, Manager
4. I,, hereby withdraw/resign as a, hereby withdraw/resign as a, Manager
·
(Print Title)
of this limited liability company and affirm the limited liability company has been notified of mesignation in writing. Canal B-Ham
Signature of Dissociating Member or Resigning Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)