L17000233537

(Re	equestor's Name)			
(Ac	idress)			
(Ac	idress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



000348938260

07/27/20--01035--021 **25.00

RECEIVED
JUL 2 3 2020

2020 JUL 23 PM 6: 09 SEURE JARY OF STATE

D. BRUCE SEP 13 2020

COVER LETTER

TO: Registration Section Division of Corporations		
CERTIFIC TECHNÓLOGY LLC SUBJECT:		
(Name of Lim	ited Liability Co	mpany)
The enclosed member, resignation or dissoci	ation and feet:	s) are submitted for filing.
Please return all correspondence concerning	this matter to:	
LELIO YAMAO		
(Contact Person)		_
TAX SOLUTIONS & BOOKKEEPING LLC		
(Firm Company)		-
7751 KINGSPOINTE PKWY - STE 119		
(Address)		
OREANDO, FL 32819		
(City/State and Zip Code)		_
For further information concerning this matte	rr, please call;	
LELIO YAMAO	407 _ at (930-0829
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee Mailing Address; Registration Section	_	Street Address: Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee. To 2415 N. Monroe Street, Spiles 10 Tallahassee, FI. 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)

	ne limited liability company as	s it appears on the records of the Florid	da Departme	ent 	
2. The Florida do 1 17000233537	cument/registration number as	ssigned to this limited liability compar	ny is:		
3. The date this n	nember/manager withdrew/resi	igned or will withdraw/resign is:	0/2020		
. I. PATRICIA MARIA FORTES MATUNAGA , hereby withdraw/resign as a ### ### Commonwealth			_		
AMBR	Adme of verson Resignings				
	(Prim Title)				
of this limited li- resignation in w	ability company and affirm the	e limited liability company has been a		•	nw 9ª
Signature of I	Dissociating Member or Resign	ning Manager		2020 JUL 23	
iling Fee: 'ertified Copy:	\$25.00 (Required) \$30.00 (Optional)		S CONTRACTOR	PH 6	