

Dec. 8. 2017 4:01 PM
12/8/2017

L1700032256836676
Division of Corporations
No. 0046 P. 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000322568 3)))



H17C003225683ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : IL BUNSTER & ASSOCIATES, PA
Account Number : 120170000038
Phone : (305)324-2248
Fax Number : (305)324-4959

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ib@accountinggroup.comcastbiz.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ALEXANDER TRAFFIC SCHOOL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALEXANDER TRAFFIC SCHOOL, LLC
(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:

INGRID L BUNSTER

(Contact Person)

IL BUNSTER & ASSOCIATES, PA

(Firm/Company)

199 SW 12TH AVENUE, SUITE 4

(Address)

MIAMI, FL 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

INGRID L BUNSTER

(Name of Contact Person)

at (305) 324-2248

(Area Code & Daytime Telephone Number)

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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, 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 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: FLORIDA
2. The Florida document/registration number assigned to this limited liability company is:
L17000236676
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 12/08/17
4. I, NATACHA GAINZA, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGMR
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Natasha Gainza
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
17 DEC -8 AM 11:14
TALLAHASSEE, FLORIDA