

L17000239519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

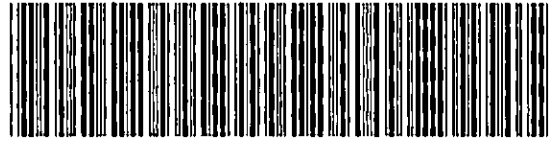
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900314880359

06/22/18--01007--030 \*\*55.00

FILED

2018 JUN 22 A 10:44

06/22/18

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Simple Solutions FL 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:

## Rashad Towns

(Contact Person)

(Firm/Company)

926 Lewis Dr

(Address)

Daytona Beach FL 32117

(City/State and Zip Code)

For further information concerning this matter, please call:

## Rashad Towns

386


383-2334

(Name of Contact Person)

at (\_\_\_\_\_)

(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: Simple Solutions FL LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L17000239519

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/17/2017

4. I, Rashad Towns (Rashad Townes), hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Manager

*(Print Title)*

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

Signature of Dissociating Member or Resigning Manager

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

2017 NOV 22 AM 11:41

RECEIVED