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.

(((H20000233789 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTAX USA INC.

Account Number : I20000000254

Phone

: (727)546-3335

Fax Number

: (727)546-3365

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\* 31

Email Address:

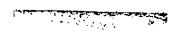
## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN BOFA SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

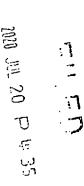
Corporate Filing Menu

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## 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)

of State is:	BOFA SERVICES LLC		
LI	ument/registration number a	ssigned to this limited liability comp	oany is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is:	07/17/2020
(Print A		, hereby withdraw/resign as a	
		ne limited liability company has been	n notified of my
Signature of Di	ssociating Member or Resig	ning Manager	
Filing Fee; Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		

## **RESIGNATION**

Know all men by these present that I, RADEK BOJKO,
do hereby tender this Resignation in confirmation
of the fact that effective immediately,
I do resign, and have resigned, all positions as Manager, Member,
and every other position which I do occupy, or formerly may have occupied,
with BOFA SERVICES LLC,
a Florida limited liability company.
Further, I herewith assign and return to said
company all units previously issued to me.

DATED this 17 day of SUCY 2020.

Signature

Name Printed