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TO: Registration Section **Division of Corporations** BELL ENTERPRISES & SYSTEMS TECHNOLOGY, LLC SUBJECT: (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: J. Douglas Bell (Contact Person) BELL ENTERPRISES & SYSTEMS TECHNOLOGY, LLA (Firm/Company) 3423 Timberwood Road (Address) Lakeland, FL 33810 (City/State and Zip Code) For further information concerning this matter, please call: Doug Bell (Area Code & Daytime Telephone Number) (Name of Contact Person) 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: **MAILING ADDRESS: Registration Section** Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, Florida 32314 2661 Executive Center Circle

Tallahassee, Florida 32301

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)

	•	s it appears on the records of the Florida Department TEMS TECHNOLOGY, LLC
2. The Florida doc L1800001923	_	ssigned to this limited liability company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/resign is: 2/19/2018
4. I, Diana Bell (Print Name of Person Resigning) Authorized Person / Member		
	(Print Title)	
resignation in wh	- · · · · · · · · · · · · · · · · · · ·	ne limited liability company has been notified of my
		2018
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	TE2 22
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