

LIB 0000 20304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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DEC 03 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nationwide Vending + Distribution LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: CL8000020304

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eddie Conza  
Name of Person

Name of Firm/Company

761 Tulip Circle  
Address

Weston FL 33327  
City/State and Zip Code

socialdistributorsales@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eddie Conza at ( 954 ) 621 7546  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### STREET ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Nationwide Vending + Distribution LLC

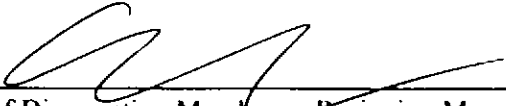
2. The Florida document/registration number assigned to this limited liability company is:  
L18000020304

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/1/18

4. I, Edward Lanza, hereby withdraw/resign as a  
(Print Name of Person Resigning)

~~Owner~~ Owner / MGR  
(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)

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