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SECRETARY OF STATE

D. BRUCE AUG 2 7 2020

COVER LETTER

_	stration Section					
Divis	sion of Corporations					
SUBJECT:	SANTANA AND SMITH INVEST	TMENTS LLC				
	(Name of Li	mited Liability Con	npany)			
The enclosed	d member, resignation or disso	ciation and fee(s) are submitted	for filing.		
Please return	all correspondence concernin	g this matter to:				
Mark W Smith	1					
	(Contact Person)					
SANTANA A	ND SMITH INVESTMENTS LLC					
	(Firm/Company)		-			
5305 Garden L	,n					
	(Address)		-			
Tampa, FL 336	610					
	(City/State and Zip Code)		_	7. 038	2020	
For further in	nformation concerning this ma	tter, please call:		ALLAI XLLAI	2020 JUL 15	***********
Mark W Smith	1	813 at (629-2578	3.2.4.5.		
(N	Jame of Contact Person)	_ \	& Daytime Telep	phone Number)	H 7	J
Enclosed ple	ease find a check made payable g Fee		Department of St g Fee & Certifice	11;	AH 7: 55	

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

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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)

	mited liability company as	s it appears on the records of the Flo	rida Dep	artme	nt
2. The Florida docum	nent/registration number a	ssigned to this limited liability comp	oany is:		
4. 1. Jonathan Santana (Print Nan Chief Executive Off of this limited liabi resignation in writi	ne of Person Resigning) Ticer - CEO rint Title) Lity company and affirm the	, hereby withdraw/resign as a, hereby withdraw/resign as a ane limited liability company has been	SECRETARY OF S	2020 JUL 15 AM 75 55	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				