## L18000067128

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(Cit	y/State/Zip/Phon	e #)		
	<b>—</b>	<b>—</b>		
☐ PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
•	•	•		
(DC	cument Number)			
Certified Copies	_ Certificate:	s of Status		
Cassial Instructions to	Titi O#:			
Special Instructions to	rinng Omcer:			
•				

Office Use Only



900356543439

12/21/20--01023--005 \*\*25.00

2029 DEC 21 AH 6: 43

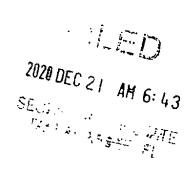
O SIMMONS FEB 05 2021

## **COVER LETTER**

_	stration Section		
Divi	sion of Corporations		
SUBJECT:	All in Site Services, LLC.		
	(Name of I	Limited Liability Co	ompany)
The enclose	d member, resignation or diss	ociation and fee(	s) are submitted for filing.
Please return	n all correspondence concerni	ng this matter to	:
Wesley Wood	l		
	(Contact Person)	• •	_
All in Site Ser	vices, LLC.		
	(Firm/Company)		<del></del>
223 SW Pierso	on Way		
	(Address)		_
Fort White Fl	32038		
	(City/State and Zip Code)		_
For further i	information concerning this m	atter, please call	:
Wesley Wood	ı	386 at (	965-4948
(1)	Name of Contact Person)		e & Daytime Telephone Number)
Enclosed pl	ease find a check made payab	le to the Florida	Department of State for:
■ \$25 Filin			ng Fee & Certified Copy
Maili	ing Address:		Street Address:
Regi	istration Section		Registration Section
	sion of Corporations		Division of Corporations
	. Box 6327 ahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
1 4116	miassee, i L 32317		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)

	e limited liability company as	it appears on the records of the Florida Department
		ssigned to this limited liability company is:
L 1800x	o Grids	
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:
4. I, Brooke Wood	Name of Person Resigning)	, hereby withdraw/resign as a
Owner	(Print Title)	
of this limited lia resignation in wi		e limited liability company has been notified of my
Signature of D	issociating Member or Resig	ning Manager
	\$25.00 (Required) \$30.00 (Optional)	