

L18000068184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

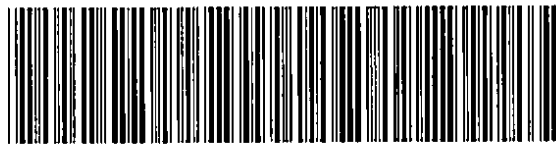
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200317884232

08/31/18--01003--004 **25.00

RECEIVED
DEPT. OF STATE
AUG 30 PM 4:46
AUG 30 AM 9:40

T. CLINE

AUG 31 2018

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

AC/DC Solar, L.L.C.

2018 AUG 30 AM 9:46

Signature _____

Requested by: Seth

08/30/18

Name

Date

Time

Walk-In

Will Pick Up

____ Art of Inc. File _____

____ LTD Partnership File _____

____ Foreign Corp. File _____

____ L.C. File _____

____ Fictitious Name File _____

____ Trade/Service Mark _____

____ Merger File _____

____ Art. of Amend. File _____

____ RA Resignation _____

____ Dissolution / Withdrawal _____

____ Annual Report / Reinstatement _____

____ Cert. Copy _____

____ Photo Copy _____

____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

____ Driving Record _____

____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

____ Courier _____



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2018 AUG 30 AM 9:40

**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: AC/DC Solar, L.L.C.

2. The Florida document/registration number assigned to this limited liability company is: 18000068184

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 08/30/2018

4. I, Dezman J. Rice, hereby withdraw/resign as a
(Print Name of Person Resigning)
member manager
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

DRice
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)