118000177012

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	·)
(Document Number)		
Certified Copies	_ Certificates o	of Status
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2018 AUG 17 AM 9: 1 SECRETARY OF STAT TALLAHASSEE, FL

R. WHITE AUG 27 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 2,02a Latina (Name of Limi	Claning Services, LLC ted Liability Company)
The enclosed member, resignation or dissocia	ation and fee(s) are submitted for filing.
Please return all correspondence concerning t	this matter to:
(Contact Person)	
(Firm/Company)	
1842 Town hall (Address)	Lane
1842 Town hall (Address) Orlando FLorida (City/State and Zip Code)	<u>32807</u>
For further information concerning this matter	er, please call:
(Name of Contact Person)	at () (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	the Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle

Tallahassee, Florida 32301



FILED

2018 AUG 17 AM 9: 11

SECRETARY OF STATE
TALLAHASSEE, FL

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)

	limited liability company as it appears on the records of the Florida Department
of State is:	-oza Lotina Cleaning Services, LLC.
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L/800	0177012
3. The date this men	mber/manager withdrew/resigned or will withdraw/resign is: $8/15/20/8$
4. I. Maria	S. Bonham , hereby withdraw/resign as a ume of Person Resigning)
<u> </u>	MBR (Print Title)
of this limited liab resignation in wri	bility company and affirm the limited liability company has been notified of my ting.
- Ý	AB
Signature of Dis	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
-	\$30.00 (Optional)