118000278459

(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basiness Emily Herrie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
j

Office Use Only



100352463461

09/21/20--01828--828 **55.00

Ja 10/23/20

COVER LETTER

TO:	_	stration Section		
	DIVIS	sion of Corporations		
SUBJ	ECT:	FOLLOW PAWS, LLC.		
2020		(Name of Limit	ted Liability Cor	mpany)
The er	nclosed	l member, resignation or dissocia	ition and fee(s	s) are submitted for filing.
Please	return	all correspondence concerning t	his matter to:	
Gabriel	l Beltrar	1		
		(Contact Person)		_
		(Firm/Company)		_
9766 W	Vest 34ti	h Avenue		
		(Address)		-
Hialeat	h, FL 33	018		
		(City/State and Zip Code)		_
For fu	rther in	nformation concerning this matte	r, please call:	
Gabriel	l Beltrar	1	786 at (660-6651
	(N	lame of Contact Person)	(Area Code	2 & Daytime Telephone Number)
	sed ple 5 Filing	ease find a check made payable to		Department of State for: g Fee & Certified Copy
	<u>-</u>	5		
	Regis	ng Address: stration Section		Street Address: Registration Section
		sion of Corporations Box 6327		Division of Corporations The Centre of Tallahassee
		hassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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 OW PAWS, LLC.				
2. The Florida document/registration number assigned to this limited liability company is: 1.18000278459					
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:				
4. I, Gabriel Beltran (Print N	, hereby withdraw/resign as a lame of Person Resigning)				
Manager					
	(Print Title)				
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my riting.				
_3					
Signature of D	issociating Member or Resigning Manager				
	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				