

L19000039001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

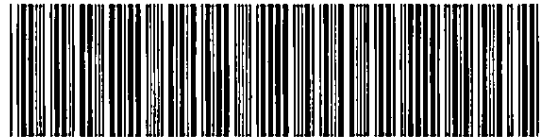
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700349373867

07/31/20--01015--012 \$425.00

FILED

2020 JUL 31 PM 1:15

SECRETARY OF STATE  
TALLAHASSEE, FL

JR 09/23/20

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SISY FUEL INTERNATIONAL LLC.  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

MARISOL REBOILLO  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

7501 E. TREASURE DR. # 9E  
(Address)

NORTH BAY VILLAGE, FL. 33141  
(City/State and Zip Code)

For further information concerning this matter, please call:

MARISOL REBOILLO at (786) 543-0670  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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



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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: SKY FUEL INTERNATIONAL LLC.

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

L19000039001

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/21/20

4. I, MARISOL REBOLLEDO, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGR  
(Print Title)

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

[Signature]  
Signature of Dissociating Member or Resigning Manager

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

**FILED**  
2020 JUL 31 PM 1:15  
SECRETARY OF STATE  
TALLAHASSEE, FL