## L19000053189

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## **COVER LETTER**

TO: Registration Section **Division of Corporations** 

SUBJECT: MR. HANDY FIX LLC			
(Name of L	imited Liability C	Company)	
The enclosed member, resignation or disso	ciation and fee	e(s) are submitted for fil	ing.
Please return all correspondence concerning	g this matter to	<b>)</b> :	
Edwin Paz			
(Contact Person)		<del></del>	
(Firm/Company)			<del>,</del>
650 85th st #4			: <del>-</del> , -
(Address)	<del></del>	<u> </u>	•
Miami Beach , FL 33141			·V. •
(City/State and Zip Code)		_	• •
For further information concerning this mat	ter, please cal	l:	
Edwin Paz	305 at (	510-1601	
(Name of Contact Person)	(Area Coo	le & Daytime Telephone	Number)
Enclosed please find a check made payable  \$25 Filing Fee	to the Florida  \$55 Filir	Department of State for ig Fee & Certified Copy	-: Y
STREET/COURIER ADDRESS:		MAILING ADDRE	SS:

Registration Section

**Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314 2019 JUN 10 AM 11: Ω Σ



## 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)

of State is:	ment/registration number a	ssigned to this limited liability comp	2019 J
L19000053189		, , ,	يار و
3. The date this men	mber/manager withdrew/res	osigned or will withdraw/resign is: hereby withdraw/resign as a	5/11/2019
(Print No	ume of Person Resigning)	, hereby withdraw/resign as a	
MGR			
	Print Title)		
resignation in wri	ting.	ne limited liability company has been	n notified of my
(a)	taro Aguilar		
Signature of Di	ssociating Member or Resig	gning Manager	
	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		