## 19000109274

(Re	equestor's Name)	
(Address)		
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: TACTICAL DET	AIUNG LLU d Liability Company)
The enclosed member, resignation or dissociat	ion and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to:
(Contact Person)	
(Firm/Company)	<u>.                                    </u>
UUIO NW 41st TEWACE	
Count Orell F 3307	3
For further information concerning this matter	, please call:
Tara Wood (Name of Contact Person)	at ( <u>501</u> ) <u>703-2877</u> (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee	
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

CR2E079 (2/14)



## 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)

	- 9 DEC
1. The name of the limited liability company as it ap	
of State is: TACTICAL DETAILING	mr = 0
2. The Florida document/registration number assignated by 19000109274	<u>.,</u> <u>.</u>
3. The date this member/manager withdrew/resigned	or will withdraw/resign is: NOVEMBER 1, 2019.
TAAAIIMA	, hereby withdraw/resign as a
Marager	need to be completely removed in ALL respects from Tachcal Detailing, LLC
of this limited liability company and affirm the lim resignation in writing.	•
Signature of Dissociating Member or Resigning	Manager
Filing Fee: \$25.00 (Required)	
Certified Copy: \$30.00 (Optional)	