

L19000114972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

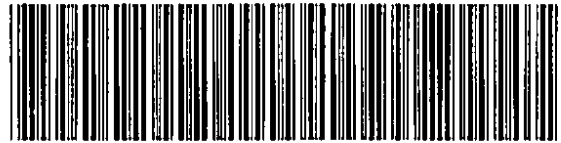
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/30/20--01020--017 **25.00

10/30/20 11:28:59

Registration

JAN 11 2021

ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GMV Services of Florida 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:

Gloria M. Guthrie
(Contact Person)

(Firm/Company)

5625 West 20 ave apt. 310
(Address)

Hialeah, Florida 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

Guthrie Gloria M at (786) 491-8942
(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

November 30, 2020

GLORIA M. GUTHRIE
5625 WEST 20 AVE 310
HIALEAH, FL 33012

SUBJECT: GMV SERVICES OF FLORIDA LLC
Ref. Number: L19000114972

We have received your document for GMV SERVICES OF FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 320A00023864



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: GMV Services of Florida LLC
2. The Florida document/registration number assigned to this limited liability company is:
L19000114972
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09-30-2020
4. I, Guthrie, Gloria M, hereby withdraw/resign as a
(Print Name of Person Resigning)
Manager, Member Manager
(Print Title)

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

Signature of Dissociating Member or Resigning Manager

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