19600162289

(Requestor's Name)			
(Address)	000334787100		
(Address)			
(City/State/Zip/Phone #)			
(Business Entity Name)	10/18/1901013002 ++25.00		
(Document Number)	1		
Certified Copies Certificates of Status	2019 OCI		
Special Instructions to Filing Officer:	IO P S		
	FLORICA CA		
	<u> </u>		

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COVER LETTER

то:	Registration Section Division of Corporations		
2.10.1	Turn It Services LLC		
SOR	JECT: (Name of Lim	ited Liability Cor	npany)
The e	enclosed member, resignation or dissoci	ation and fee(s	s) are submitted for filing.
Pleas	e return all correspondence concerning	this matter to:	
Bern	adette J Cannings		
	(Contact Person)		
Turn	It Services LLC		
	(Firm Company)		_
1541	15 Peach Stone Place		<u> </u>
	(Address)		
Rus	kin, FL 33573		
-	(City/State and Zip Code)		
For t	further information concerning this mat	ter, please call	:
Berr	nadette J Cannings	813 at (7530506
	(Name of Contact Person)	(Area Cod	e & Daytime Telephone Number)
	osed please find a check made payable 25 Filing Fee	to the Florida S55 Filir	Department of State for: ng Fee & Certified Copy
Regi Divi Clift 2661	REET/COURIER ADDRESS: istration Section sion of Corporations con Building I Executive Center Circle ahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR211079 (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)

	limited liability company as	it appears on the record	ds of the Florida D	epartment
2. The Florida doc L1900015228	ument/registration number as	signed to this limited li	iability company is	s:
3. The date this me	ember/manager withdrew/res	igned or will withdraw/	10/9/19 resign is:	
1 11 1 1 1 1				
(Print i	Name of Person Resigning)	·	•	
Managing Me				
	(Print Title)		2019 7/100	
of this limited lia resignation in w	ability company and affirm the	e limited liability comp	pany has been moti	fied of my
LEE	[Place'le			
Signature of D	issociating Member or Resig	ning Manager	1.05.70%	
Filing Fee:	\$25.00 (Required)			
Certified Copy:				