L19000 158 307

(Req	juestor's Name)	
(Add	iress)	 .
(Add	lress)	
(Add	1033)	
(City	/State/Zip/Phone	e #)
· PICK-UP	WAIT	MAIL
· (Bus	iness Entity Nar	ne)
(DG3	incos Endry Har	ne,
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to F	iling Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 6320, 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:
Dean Bardino
(Contact Person)
63ao, LLC (Firm/Company)
1835 E Hallardale Brach Blud #282 (Address)
Hallandale, FL 33009 (City/State and Zip Code)
For further information concerning this matter, please call:
Dean Bardino at (786) 395-9495
(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 \$\sum \\$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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)

1.73	
i. The name of the	limited liability company as it appears on the records of the Florida Department
of State is:	6320, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L19000	158307
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 4/9/19
4.1, Dean (Print N	Bardine, hereby withdraw/resign as a ame of Person Resigning)
Managi	ng member. (Print Title)
of this limited lial resignation in wri	oility company and affirm the limited liability company has been notified the string.
1	5 -
Signature of Di	sectiating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)

CR2E079 (2/14)