119000146505

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



300370580443

1506/190/20 TH

FILED
2021 JUL 28 PH 12: 36
SECRETARY OF STATE

13

COVER LETTER

Division of Corporations		
SUBJECT: AMES SENSICES 11 C (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:		
ROYAMA Richmond (Contact Person)		
AMES Services LLC (Firm/Company)		
4039 Marie Dr. (Address)		
Lakeland FL 33823 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Torry Ames at (SG3) 286-284 (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee S55 Filing Fee & Certified Copy		
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314



FILED

2021 JUL 28 PH 12: 36

SECRETARY OF STATE TALLAHASSEE, FLORIDA 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: AMES SERVICES LLC.
2. The Florida document/registration number assigned to this limited liability company is:
<u> 19000166505</u>
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 07/03/202
4. I. CYCOCO hereby withdraw/resign as a (Print Name of Person Resigning)
(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)