L19000171338

(R	lequestor's Name)	
:(A	ddress)	
. (A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:	Mount Subsurface Consultants L	LC	
ocbozer.		Limited Liability Co	ompany)
The enclose	d member, resignation or dis	sociation and fee(s) are submitted for filing.
Please retun	n all correspondence concern	ing this matter to	:
Vanessa Serra	no		
	(Contact Person)		
	(Finn Company)		_
15235 Lakes o	of Delray Boulevard #305		
	(Address)		_
Delray Beach.	. Florida 33484		
	(City/State and Zip Code)		
For further i	information concerning this n	natter, please call	:
Vanessa Serra	ino	954 at (445-0534
(1)	Name of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclosed ple	ease find a check made payab	ole to the Florida	Department of State for:
■ \$25 Filin	• •		g Fee & Certified Copy
	ing Address: istration Section		Street Address: Registration Section
Divi	sion of Corporations		Division of Corporations
_ · · · ·	Box 6327 ahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
I alla	aracocc, 1 12 22314		Tallahassee, FL 32303





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 records of the Florida Department Subsurface Consultants LLC
2. The Florida docu L19000171338	ament/registration number assigned to this fimited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
	, hereby withdraw/resign as a aume of Person Resigning)
Member	
	(Print Title)
resignation in wr	-
5 M	ssociating Member or Resigning Manager
Signature of Di	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)