

**L1900182161**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@abkcorp.com

2020 MAY 18 PM 12:00

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
D&E FLORIDA SERVICES LLC**

Certificate of Status	0
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MAY 19 2020

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: D&E FLORIDA SERVICES 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:

LETICIA SANTOS

(Contact Person)

ACCOUNT BOOKKEEPING COR

(Firm/Company)

5301 CONROY ROAD SUITE 140

(Address)

ORLANDO - FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

LETICIA SANTOS

at 407 8981757

(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



2020 MAY 18 PM 12:00

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: D&E FLORIDA SERVICES LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L19000182161
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 5-6-2020
4. I, WILLIAMS PORTUGAL JUNIOR, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
MGR  
*(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

\_\_\_\_\_  
d)  
\_\_\_\_\_  
Copy: \_\_\_\_\_