## 119000 203 488

(Re	equestor's Name)	<u> </u>
(,,-	,	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
=.=.	· · · · · · · · · · · · · · · · · · ·	





900334344419

09/05/19--01014--005 \*\*55,00

2019 OCT 24 AM 10: 26



## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Verde Solar, L (Name of Limited	Liability Company)	
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to:	
Ann Foley (ContactPerson)		
(Firm/Company)		
4495 Lake Washing	ton RD	
Melbourne, FC 32 (City/State and Zip Code)	934	
For further information concerning this matter, p	blease call:	
Ann Fole at (Name of Contac (Person)	(321) 432-7444 (Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to th  ☐ \$25 Filing Fee	e Florida Department of State for:  \$555 Filing Fee & Certified Copy  Paid	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
egistration Section Registration Section		
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
ZOOT PACCULAC OCHICL OHOLO	a tegresticouracy a rotation of and a r	

Tallahassee, Florida 32301

CR2E079 (2/14)



October 11, 2019

ANN FOLEY 4495 LAKE WASHINGTON ROAD MELBOURNE, FL 32934

SUBJECT: VERDE SOLAR LLC Ref. Number: L19000203488

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You cannot make both changes on the one (1) form.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 019A00021016

Claretha Golden Regulatory Specialist II



2019 CCT 24 AN IO: 26

## 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:	erde Solar, LLC
2. The Florida docu	ment/registration number assigned to this limited liability company is:
L190	ΦΦ 2 Φ 3 4 8 8
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 8-10-19
4. I, A n (Print N	hereby withdraw/resign as a me of Person Resigning)
	Print Tale)
of this limited lial resignation in wri	pility company and affirm the limited liability company has been notified of my ting.
$g_{m_{\alpha}}$	a Folan
Signature of Di	ssociating Member/or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)