# L19000336746

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(0-	A November 2	
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800355794678

01/07/21--01004--010 \*\*25.00

2021 JAN -7 PM 2: 46
SECRETARY OF STATE

2/18/21

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: La Hacienda Lau (Name of Limited	in Service LLC.
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Juan Cano Baez (Contact Person)	α
NJA (Firm/Company)	
3980 7th Ave SW.	<del></del>
Naples, FL 34119 (City/State and Zip Code)	
For further information concerning this matter, p	olease call:
Juan Cano Baeza at (Name of Contact Person)	(239) 825-4323 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th  \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

#### FILED

2021 JAN -7 PH 2: 46

SECRETARY OF STATE TALLAHASSEE, FL

## 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: La	Hacienda Lawn Service LLC
2. The Florida docu	ument/registration number assigned to this limited liability company is:
119000	23107410
	mber/manager withdrew/resigned or will withdraw/resign is: 01/01/202
4. I,	(coo Baeza , hereby withdraw/resign as a lame of Person Resigning)
_ Manag	Print Title)
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)