

L19000 237720

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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20 JAN 17 PM 2:22

CLERK OF SUPERIOR COURT
DIVISION OF REGISTRATION

FEB 18 2020
C McNAIR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MELVYN I RODRIGUEZ LLC
(Name of Limited Liability Company)

RECEIVED
JAN 17 2017
PM 2:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Melvyn Rodriguez

(Contact Person)

MELVYN I RODRIGUEZ LLC

(Firm/Company)

1426 Madison Ivy Cir

(Address)

Apopka, FL 32712

(City/State and Zip Code)

For further information concerning this matter, please call:

Melvyn Rodriguez

at (407) 205-5620

(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



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)

20 JAN 17 PM 22
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: MELVYN I RODRIGUEZ LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000237720

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/01/2020

4. I, Lauren M Ehrlich Rodriguez, hereby withdraw/resign as a
(Print Name of Person Resigning)

Authorized Person

(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)