L19000245760

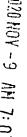
| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
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| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations NEW FACE WINDOW TINT & DETAIL LLC SUBJECT: (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: ALFREDO MERCADO (Contact Person) PRIMETAX SOLUTIONS LLC (Firm/Company) 50 N LAURA ST STE 2500 (Address) JACKSONVILLE, FL 32202 (City/State and Zip Code) For further information concerning this matter, please call: ALFREDO MERCADO 904 729-0372 (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed please find a check made payable to the Florida Department of State for: ☐ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Mailing Address: Street Address: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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)

| | limited liability company as it a FACE WINDOW TINT & DETAIL I | | e Florida Department |
|--|---|--------------------------------|-----------------------|
| | | | · |
| 2. The Florida doct L19000245760 | ument/registration number assig | ened to this limited liability | company is: |
| | | <u>_</u> · | NOVEMBER 6, 2020 |
| | mber/manager withdrew/resign ALLO TRINIDAD | ed or will withdraw/resign i | s: |
| 4. I, | | , hereby withdraw/resign | as a |
| (Print N MGR | ame of Person Resigning) | | |
| | (Print Title) | | |
| of this limited lia resignation in wr | bility company and affirm the li iting. | mited liability company has | s been notified of my |
| hu | | | 2020 NOY |
| Signature of D | ssociating Member or Resignin | g Manager | 6-40 |
| - | \$25.00 (Required) \$30.00 (Optional) | | AH 7: 0 |