L19000250303

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
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(Business Entity Name)			
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TO: Registration Section Division of Corporations		TO THE THE PARTY OF THE PARTY O
SUBJECT: AEROTECH AUTOMOTIVE LLC		
(Name of Limited Liability Com	pany)	
The enclosed member, resignation or dissociation and fee(s)		
Please return all correspondence concerning this matter to:		
MARK STEPHEN FITZGERALD		
(Contact Person)		
AEROTECH AUTOMOTIVE LLC		
(Firm/Company)		
970 HIGHWAY 98 EAST, UNIT T107		
(Address)		
DESTIN, FL 32541		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
MARK STEPHEN FITZGERALD 850	533-5733	
· · · · · · · · · · · · · · · · · · ·	& Daytime Telephone Numb	ber)
Enclosed please find a check made payable to the Florida De \$25 Filing Fee \$55 Filing	epartment of State for: Fee & Certified Copy	

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Tallahassee, Florida 32314

P.O. Box 6327

MAILING ADDRESS: Registration Section

Division of Corporations

CR2E079 (2/14)



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 li	imited liability company a	s it appears on the records of the Florida Department
of State is:	OTECH AUTOMOTIVE I	LLC
		assigned to this limited liability company is:
L19000250303		
3. The date this mer	nber/manager withdrew/re	signed or will withdraw/resign is:
4. I, EDDIE MALDONADO (Print Name of Person Resigning)		hereby withdraw/resign as a
(Print No	ame of Person Resigning)	
MANAGER		
	Print Title)	
of this limited liab resignation in wri	pility company and affirm iting.	the limited liability company has been notified of my
Signature of Di	ssociating Member or Res	signing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	