

119000 294045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

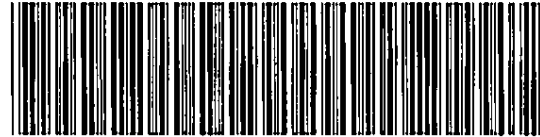
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2020 AUG 31 PM 1:25

SECRETARY OF STATE  
TALLAHASSEE, FL

JQ 10/13/20

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Scott Newell Consulting Service LLC  
(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:

Scott Newell  
(Contact Person)

Scott Newell Consulting Service  
(Firm/Company)

13534 Goodrich Ave.  
(Address)

Port Charlotte, FL 33953  
(City/State and Zip Code)

For further information concerning this matter, please call:

Scott Newell at (740) 260-4769  
(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)

1. The name of the limited liability company as it appears on the records of the Florida Department

of State is: Scott Newell Consulting Service LLC

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

L19000294045 / 84-395 8756

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

4. I, Marty J Wood-Starcher, hereby withdraw/resign as a  
(Print Name of Person Resigning)

AMBR

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Marty J Wood-Starcher  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

**FILED**  
2020 AUG 31 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FL