

120 00 000 7747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

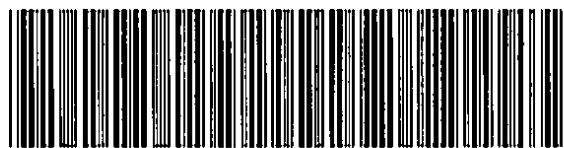
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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ST. CLAIR COUNTY
ALLIANT ENERGY

MAR 21 2020
J ALBRITTON

Reignatior

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GAETA'S GARAGE, 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:

JIMMY GAETA

(Contact Person)

GAETA'S GARAGE, LLC

(Firm/Company)

1270 BISCAYNE BLVD. UNIT 8

(Address)

DELAND, FL 32724

(City/State and Zip Code)

For further information concerning this matter, please call:

JIMMY GAETA 352 403-8418

(Name of Contact Person) at (_____) (Area Code & Daytime Telephone Number)

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



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FLORIDA SECRETARY OF STATE
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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: GAETA'S GARAGE, LLC

2. The Florida document/registration number assigned to this limited liability company is:
L20000007747

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 02/27/2020

4. I, MARGARET A GAETA, hereby withdraw/resign as a
(*Print Name of Person Resigning*)
MANAGER
(*Print Title*)

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

A handwritten signature in black ink, appearing to read "Margaret A. Gaeta".

Signature of Dissociating Member or Resigning Manager

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