

220000035655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

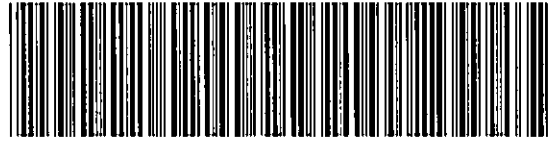
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/19/20--01019--000 **25.00

AUG 05 2020
S. YOUNG

FILED
2020 JUN 19 AM 8:11

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: eLearning Launch, 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:

Alexander Salas
(Contact Person)

eLearning Launch, LLC
(Firm/Company)

14367 Paradise Tree Dr
(Address)

Orlando, FL 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

Alexander Salas at (407) 288-3838
(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: eLearning Launch, LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L20000035655.
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 06/15/2020
4. I, Aaron King, 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.

DocuSigned by: Aaron King 6/16/2020
Signature of Dissociating Member or Resigning Manager

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

2020 JUN 19 AM 8:11

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Certificate Of Completion

Envelope Id: 3D897218387E49AF9EC1285B98E2EE71
 Subject: Please DocuSign: eLearning Launch Resignation and SunBiz Change document
 Source Envelope:
 Document Pages: 3
 Certificate Pages: 2
 AutoNav: Enabled
 EnvelopeId Stamping: Enabled
 Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Status: Completed

Envelope Originator:
 Alexander Salas
 asalas@stylelearn.com
 IP Address: 68.205.85.251

Record Tracking

Status: Original
 6/15/2020 6:20:58 PM

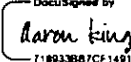
Holder: Alexander Salas
 asalas@stylelearn.com

Location: DocuSign

Signer Events

Aaron King
 aaron@elearninglaunch.com
 Security Level: Email, Account Authentication
 (None)

Signature

DocuSigned by

 718933887C51491

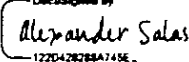
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Timestamp

Sent: 6/15/2020 6:49:58 PM
 Viewed: 6/16/2020 5:09:07 AM
 Signed: 6/16/2020 5:09:44 AM

Electronic Record and Signature Disclosure:
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Alexander Salas
 alex@elearninglaunch.com
 Security Level: Email, Account Authentication
 (None)

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Signature Adoption: Pre-selected Style
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 Signed: 6/16/2020 5:11:14 AM

Electronic Record and Signature Disclosure:
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In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

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Alexander Salas
 asalas@stylelearn.com
 Alexander Salas

Security Level: Email, Account Authentication
 (None)

Electronic Record and Signature Disclosure:
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Witness Events

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