

120 0000 48478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

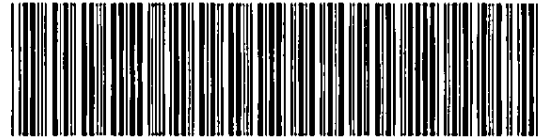
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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10/01/21--01008--010 \*\*25.00

2021 OCT - 1 AM 10:49  
FILED

Resignation

OCT 09 2021  
ALBRITTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Falco Rentals 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:

Justin Falco  
(Contact Person)

Falco Rentals LLC  
(Firm/Company)

917 Gloriosa Ave  
(Address)

Winter Park, FL 32789  
(City/State and Zip Code)

For further information concerning this matter, please call:

Justin Falco at ( 407 ) 808-0360  
(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



2021 OCT -1 AM 10:49

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: Falco Rentals LLC

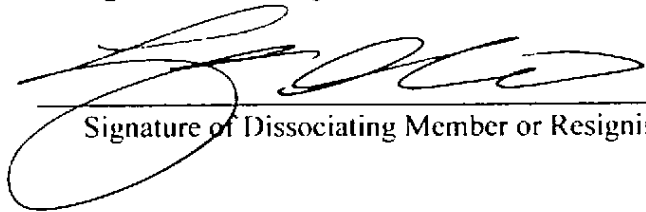
2. The Florida document/registration number assigned to this limited liability company is:  
L20000048478

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/01/2021

4. I, Lydia Falco, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Authorized Member  
*(Print Title)*

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

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

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