

**L20000072500**  
Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : I20120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: customer@abkcorp.com

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
J & A FLORIDA SERVICES LLC

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S. PRATHER

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TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: J & A FLORIDA SERVICES 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:

STEPHANIE CASTRO  
\_\_\_\_\_  
(Contact Person)

ACCOUNT BOOKKEEPING CORP  
\_\_\_\_\_  
(Firm/Company)

5301 CONROY RD, STE 140  
\_\_\_\_\_  
(Address)

ORLANDO, FL 32811  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHANIE CASTRO at (407) 898-1757  
\_\_\_\_\_  
(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: J & A FLORIDA SERVICES LLC

2. The Florida document/registration number assigned to this limited liability company is:  
1.20000072500

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 8/31/2021

4. I, HEBERTO CASTILLO ALONSO, 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 "Heberto Castillo Alonso", is written over a horizontal line.

Signature of Dissociating Member or Resigning Manager

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STATE