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SECRETARY OF STATE

D. BRUCE AUG 23 1070

COVER LETTER

	COVER LETTER		
TO: Registration Section Division of Corporations	s	:	
24HR Sanitize LLC SUBJECT:			
	(Name of Limited Liability Con	npany)	_
The enclosed member, resignati	ion or dissociation and fee(s) are submitted for filing.	
Please return all correspondence	e concerning this matter to:		
Daniel S Carlson			
(Contact Per	rson)	-	
24HR Sanitize LLC			
(Firm/Comp	pany)	-	
1060 22nd Ave N. #2			
(Address)		-	
Saint Petersburg, FL 33704		SE 	2021
(City/State and 2	Zip Code)	ALL	۳.
For further information concern	ing this matter, please call:	AHA	2020 JUL 14
Daniel S Carlson	727 at (608-9027 ' ලා පා _)	AH 8:
(Name of Contact Perso	on) (Area Code	& Daytime Telephone Number)	
Enclosed please find a check ma		= -	
■ \$25 Filing Fee	□ \$55 Filing	Fee & Certified Copy	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	S	Street Address: Registration Section Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		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)

. 24НК	limited liability company a		·
2. The Florida doc 1.20000101503	ument/registration number a	assigned to this limited liabi	lity company is:
3. The date this me Matthew Mannii 4. I.	ember/manager withdrew/res		
	'ame of Person Resigning)	, hereby withdraw/res	ngn as a
	(Print Title) bility company and affirm thing.	he limited liability company	·
Signature of Di	issociating Member or Resig	gning Manager	2020 JUL 14 SECRETAD TALLAHA
-	\$25.00 (Required) \$30.00 (Optional)		ASSEE, F