

220000138218

(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:

form

Office Use Only



500348542455

07/23/20--01016--004 **05.00

RECEIVED

JUL 16 2020

20 SEP 21 AM 11:03

FILED
CLERK OF SUPERIOR COURT
JULY 16 2020

Dissociation
of
Member

OCT 14 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pratna Diversion 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:

Dayane Zamora-Alvarez
(Contact Person)

Pratna Diversion Services LLC
(Firm/Company)

3055 Genie Hwy, Suite A
(Address)

Geborg FL 33870
(City/State and Zip Code)

For further information concerning this matter, please call:

Dayane Zamora-Alvarez at 863. 386. 4447
(Name of Contact Person) (Area Code & Daytime Telephone Number)
786. 718. 3188

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

FILED
CLERK OF STATE
DIVISION OF CORPORATIONS
20 SEP 21 AM 11:03



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2020

CLARY'S BAIL BOND AGENCY
C/O ELIZABETH CLARY
PO BOX 149
QUINCY, FL 32353

SUBJECT: PRETRIAL DIVERSION SERVICES, LLC
Ref. Number: L20000138218

We have received your document for PRETRIAL DIVERSION SERVICES, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong resignation form. Please complete the attached form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 020A00017063

** Please see
attached forms
Thanks!*



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: Florida

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

L200000138218

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

4. I, Elizabeth Clary, hereby withdraw/resign as a
(Print Name of Person Resigning)

MGR
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
20 SEP 21 AM 11:03