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D. C. C. MAIOI

AU3 0 1 2020 I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: Abrasive Power Company	-LC	
(Name of I	.imited Liability C	(ompany)
The enclosed member, resignation or disse	ociation and fee	e(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to):
Francois Poulin		
(Contact Person)		<u>—</u>
APC		
(Firm/Company)		_
9075 Colby Drive Unit 2610		
(Address)		_
Ft-Myers, Florida, 33919		
(City/State and Zip Code)		_
For further information concerning this m	atter, please cal	t:
Francois Poulin	239 at (848-2995
(Name of Contact Person)		de & Daytime Telephone Number)
Enclosed please find a check made payabl ☐ \$25 Filing Fee		Department of State for: ng 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

CR2E079 (2/14)





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)

	limited liability company as it appears on the records of the Florida Department
of State is: Abra.	sive Power Company LLC
2. The Florida doc L20000149806.	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
Elena Rodziani	
AMBR	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of O	skociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)