LZ0000/60405

(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:	
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COVER LETTER

TO: Regis	stration Section	
Divis	sion of Corporations	
SUBJECT:	S & A At Your Service LLC	
	(Name of L	imited Liability Company)
The encloses	d member, resignation or disse	ciation and fee(s) are submitted for filing.
Please return	n all correspondence concerni	g this matter to:
Gonzalo A An	naya	
	(Contact Person)	
S&A At Your	Service LLC	
	(Firm/Company)	
226 Citrus Po	inte Dr	
	(Address)	
Haines City F	L 33844	
	(City/State and Zip Code)	
For further	information concerning this m	atter, please call:
Gonzalo A Ar	naya	at (239) 633-8411
(!	Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed pl	ease find a check made payab	e to the Florida Department of State for:
☐ \$ 25 Filir	- ·	■ \$55 Filing Fee & Certified Copy
Mail	ing Address:	Street Address:
	istration Section	Registration Section
-	sion of Corporations	Division of Corporations
	Bux 6327	The Centre of Tallahassee
Tall	ahassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

CN2E079 (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)

1. The name of the	limited liability company a	s it appears on the records of the Florida Departs	ment
of State is: S&A	at your Service LLC		<u>_</u> .
2. The Florida doc	ument/registration number a	ssigned to this limited liability company is:	
L20000160405	· _ · · · · · · · · · · · · · · · · · ·	·	
3. The date this me	ember/manager withdrew/re	signed or will withdraw/resign is: 02/06/2021	_
4, I, Soma I Lara		, hereby withdraw resign as a	
(Print !	Name of Person Resigning)		
AMBR Authoriza	e Member		
	(Print Title)		
of this limited lia resignation in wi		he limited liability company has been notified or	ſmy
Sa	will		
Signature of D	is sociating Member or Resig	gning Manager	
			2021
Filing For:	\$25.00 (Required)		لعن لئر
Certified Copy:	\$30,00 (Optional)		$\boldsymbol{\omega}$