## LZO 00026402Z

(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Entity Name)
(Document Number)
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ALLAMANSSEE, FLORIDA

## . COVER LETTER

TO: Registration Section Division of Corporations	,
VOS SOLAR LLC SUBJECT:	
	Liability Company)
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
VEADIMIR YNSUA	
(Contact Person)	<del></del>
VOS SOLAR LLC	
(Firm/Company)	
8891 SW 142ND AVE APT 833	
(Address)	<del></del>
MIAMI, FL 33186	
(City/State and Zip Code)	
For further information concerning this matter, p	please call:
VLADIMIR YNSUA	973 536-4817
	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	e Florida Department of State for:
	\$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	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)

of State is: VOS	SOLAR LLC		·		
2. The Florida doc L20000264022	ument/registration number a	ssigned to this limited lial	bility company is:		
	ember/manager withdrew/res	igned or will withdraw/re	esign is:		
4. 1, OSMANY GAV	'ILAN 'ame of Person Resigning)	, hereby withdraw/re	, hereby withdraw/resign as a		
Authorized Mem	ber (Print Title)				
resignation in wr	sulgirilan		ny has been notified of my		
Signature of Di	issociating Member or Resig	ning Manager	~		
	\$25.00 (Required) \$30.00 (Optional)		FILEI 1000 SEP 28 P ALLAHASSIESTI		

CR2E079 (2/14)