

120000277394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

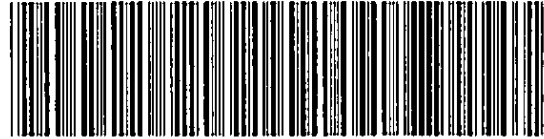
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
DEC - 1 2021

11/23

Office Use Only



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10/28/21--01008--016 **35.00

FILED
2021 NOV 23 PM 11:10
SECRETARY OF STATE
TALLAHASSEE, FL 32310



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 NOV 23 AM 9:49

November 8, 2021

MICHAEL FRANCIS
9736 ROCHEL PL
WELLINGTON, FL 33414 US

SUBJECT: M.A IMPORT & EXPORT L.L.C.
Ref. Number: L20000277394

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 421A00027191

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: M.A Import & Export L.L.C
(Name of Corporation)

DOCUMENT NUMBER: L20000277394

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL FRANCIS
(Name of Person)

M.A Import & Export LLC
(Name of Firm/Company)

9736 Roche pl
(Address)

Wellington FL- 33414
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL Francis at (561) 578-3330
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FILED

2021 NOV 23 PM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: MICHAEL FRANK'S

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

220000277394

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/15/2021

4. I, Michael Frank's, hereby withdraw/resign as a
(Print Name of Person Resigning)

MANAGER
(Print Title)

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

Michael Frank's
Signature of Dissociating Member or Resigning Manager

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