

L20000303088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

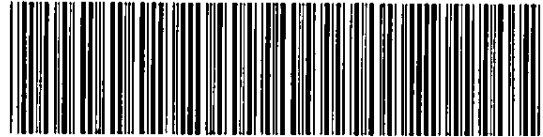
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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10/19/23--01003--001 \*\*25.00

CLERK OF COURT  
TALLAHASSEE, FLORIDA

2023 OCT 18 AM 8:03

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 18, 2023

WILL L VITAL  
PO BOX 551439  
ORLANDO, FL 32855

SUBJECT: ETHAN'S AUTOMOTIVE SOLUTIONS, LLC  
Ref. Number: L20000303088

We have received your document for ETHAN'S AUTOMOTIVE SOLUTIONS LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 223A00021499

RECEIVED  
2023 OCT 18 PM 1:50

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ethan's Automotive Solutions 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:

Will L Vital

(Contact Person)

Ethan's Automotive Solutions

(Firm/Company)

PO Box 551439

(Address)

Orlando FL 32855

(City/State and Zip Code)

For further information concerning this matter, please call:

Will L Vital

407 800-1773

at ( )

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

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



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: Ethan's Automotive Solutions LLC

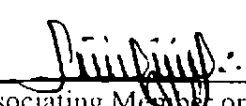
2. The Florida document/registration number assigned to this limited liability company is:  
L20000303088

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 08/11/2023

4. I, Will L Vital, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Will L Vital  
(Print Title)

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

  
Signature of Dissociating Member or Resigning Manager

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

FILED  
2023 OCT 18 AM 8:03  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE