## 120 CCC320237

| (Req                                    | uestor's Name)   |           |  |  |  |
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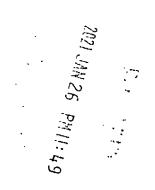
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MAR () 6 2021 S. YOUNG



## **COVER LETTER**

| _             | sion of Corporations          |                       |  |
|---------------|-------------------------------|-----------------------|--|
| SUBJECT:      | CARDONA - LOPEZ LLC           |                       |  |
| Separe 1.     | (Name of                      | Limited Liability Co. | nipany)  |
| The enclose   | d member, resignation or dis  | sociation and fee(    | s) are submitted for filing.                               |
| Please return | n all correspondence concerr  | ning this matter to:  |  |
| Madeleine D.  | Longaray                      |                       |  |
|               | (Contact Person)              |                       | _  |
| LONGARAY      | & ASSOCIATES INC              |                       |  |
|               | (Firm/Company)                |                       | _  |
| 8360 West Fla | agler St 203                  |                       |  |
|               | (Address)                     |                       | <del></del>  |
| Miami, FL 33  | 3144                          |                       |  |
|               | (City/State and Zip Code)     |                       | _  |
| For further i | information concerning this i | natter, please call:  |  |
| Madeleine D.  | Longaray                      | 305<br>at (           | 553-9801   |
| (1)           | Name of Contact Person)       |                       | & Daytime Telephone Number)                                |
| _             | ease find a check made payal  |                       | •  |
| 🏻 \$25 Filin  | ng Fee                        | □ \$55 Filin          | g Fee & Certified Copy                                     |
|               | ing Address:                  |                       | Street Address:  |
|               | istration Section             |                       | Registration Section                                       |
|               | sion of Corporations Box 6327 |                       | Division of Corporations                                   |
|               | ahassee, FL 32314             |                       | The Centre of Tallahassee 2415 N. Monroe Street, Suite 819 |
| 1 4116        | and8600, FL 32314             |                       | 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)

|  | limited liability company a              | s it appears on the records of the                            | Florida Department |
|--|--|---|--------------------|
| 2. The Florida doc<br>1,20000320237      | ument/registration number a              | assigned to this limited liability co                         | ompany is:         |
| Madeleine D. Le                          | 1509F15                                  | signed or will withdraw/resign is:, hereby withdraw/resign as |                    |
| Manager                                  | tame of Person Resigning) (Print Title)  |   |                    |
| of this limited lia<br>resignation in wr |  | he limited liability company has t                            | ·                  |
| Signature of D                           | issociating Member or Resig              | gning Manager   | 92 NW 1862         |
| •  | \$25.00 (Required)<br>\$30.00 (Optional) |   | P                  |