L20 000 343318

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3/29/21

COVER LETTER

TO: Registration Section Division of Corporations

(Name of Lit	nited Liability Company)
The enclosed member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
DENISE POLANO TRAVIS	
(Contact Person)	
THE CLEANING TEAM, LLC	
(Firm Company)	
19100 BEATRICE LANE	
(Address)	
LAND O LAKES, FL 34638	
(City/State and Zip Code) For further information concerning this mat	iter, please call:
(Name of Contact Person)	at (310) 7213794 (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:	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)

i. The name of the l	imited liability company as it appears on the records of the Florida Department
of State is: THE C	LEANING TEAM, LLC
2. The Florida docur	ment/registration number assigned to this limited liability company is:
L20000343318	·
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is: 03/01/2021
4. 1. JERRY P HARRO (Print Nat	hereby withdraw/resign as a me of Person Resigning)
AUTHORIZED PE	RSON / MEMBER
of this limited liabi resignation in writ	lity company and affirm the limited liability company has been notified of mying.
Signature of D	ciating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)