## L20000343577

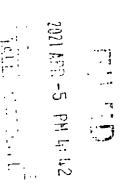
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	⇒ #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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D RRUCE MAY 2.6 2021

## COVER LETTER.

Division of Corporations	
SUBJECT: Cor Wash Lakay LL (Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee	(s) are submitted for filing.
Please return all correspondence concerning this matter to	):
Roland Elitond (Contact Person)	
COT Wash lakay LL (Firm/Company)	_ <del>_</del>
3451 NE 11th Ave (Address)	2021 APR -5
Panpano Beach, F. 1 33064 (City/State and Zip Code)	- 5 5 1: 5 7 1: 5 7 7 7 7 7 7 7
For further information concerning this matter, please cal	h 二 五 元 五
Ruland Eliberal at (786 (Name of Contact Person) (Area Coo	le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida  ☐ \$25 Filing Fee ☐ \$55 Filing	Department of State for: ng Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314



## 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 Depar	tment
of State is: Car wash lakay LLC	·
2. The Florida document/registration number assigned to this limited liability company is:	
L20000343577	
3. The date this member/manager withdrew/resigned or will withdraw/resign is:	<u>lisnor</u>
4. I. Hallo Felisoc , hereby withdraw/resign as a (Print Name of Person Resigning)	
MGR (Print Title)	
of this limited liability company and affirm the limited liability company has been notified or resignation in writing.	of my
Adlin FElisnor	2021 AF
Signature of Dissociating Member or Resigning Manager	70 BU

CR2E079 (2/14)

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)