La1000015740

(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



600410693986

S. CHATHAM AUG 13 2023

07/05/23--01030--025 **25.00



COVER LETTER

TO: Registration Section Division of Corporations Atlas 08, LLC. SUBJECT: (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: Adolfo Valero (Contact Person) Atlas 08, LLC. (Firm Company) 600 LAKEVIEW RD, STE D, (Address) CLEARWATER, FL 33 7 56 (City State and Zip Code) For further information concerning this matter, please call: Adolfo Valero (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Street Address: Mailing 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



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 as it 08, LLC.	appears on the records of the Florida Department
2. The Florida doc L21000015740	ument/registration number assig	gned to this limited liability company is:
Chana Cam (all	ember/manager withdrew/resign	, hereby withdraw(resign) as a
Manager	(Prnu Title)	
resignation in wr	iting.	imited liability company has been notified of my In the second of my I
Filing Fee:	issociating Member or Resignin \$25.00 (Required) \$30.00 (Ontional)	ig Manager