L21000066044

(Requestor's Name)			
(Address)	700373812287		
(Address)	100010012201		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	09/27/2101013030 **25.00		
(Document Number)	2021 SEC T/		
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COVER LETTER

Division of Corporations	
SUBJECT: Car Movers Ame (Name of Limited)	TICCL Liability Company)
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
Maxine Bershadsky (Contact Person)	 -
(Firm/Company)	
26 Waterford B	
Delray Beach, FL 3341 (City/State and Zip Code)	46
For further information concerning this matter, p	olease call:
Maxine at (Name of Contact Person)	(561), 546-3333 (Area Code & Daytime Telephone Number)
Englosed please find a check made payable to th	
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 compar	ry as it appears on the	ie records of th	ie Florida Department
of State is:	Car Movers	America	LLC	·
2. The Florida docu	ument/registration numb	er assigned to this li	imited liability	company is:
L2100	00660 44			
3. The date this me	mber/manager withdrev	v/resigned or will wi	thdraw/resign	is: <u>9/20/21</u>
Mana	(Print Title)	·		
of this limited lia resignation in wr	bility company and affiriting.	m the limited liabili	ty company ha	s been notified of my
Signature of Di	ssociating Member or R	esigning Manager		2021 SECR TAL
_	\$25.00 (Required) \$30.00 (Optional)			SEP 27 I