21000069999

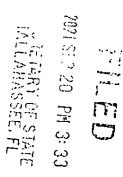
(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name)		
(Do	cument Number)	<u>-</u>	
Certified Copies	_ Certificates of	Status	
Special Instructions to Filing Officer:			

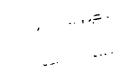
Office Use Only



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COVER LETTER

TO: Registration Section		
Division of Corporations	· :	
SUBJECT:		
(Name of	f Limited Liability Company)	
The enclosed member, resignation or dis	ssociation and fee(s) are submitted for filing.	
Please return all correspondence concern	ning this matter to:	
Jozuana Vizcaya		
(Contact Person)		
J-Shine Cleaning Services LLC		
(Firm/Company)		
600 Starkey Rd. Apt 115		
(Address)		
Largo, FI 33771		
(City/State and Zip Code)		
For further information concerning this n	natter, please call:	
Jozuana Vizcaya	727 254-1810	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed please find a check made payab	ple 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 P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	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 th	e limited liability company a	s it appears on the records of	the Florida Department
of State is: J-Sh	ine Cleaning Services, LLC		
2. The Florida doc 1.21000069999	cument/registration number a	assigned to this limited liabilit	y company is:
3. The date this m	ember/manager withdrew/re	signed or will withdraw/resign	07.01.2021 n is:
4. I. Vovani Cancio (Print Name of Person Resigning)		, hereby withdraw/resig	n as a
(Print)	Name of Person Resigning)		
AMBR			
	(Print Title)		7921
of this limited lice resignation in w	ability company and affirm thriting.	he limited liability company l	
	MA		PH 3: 33
Signature of D	Oissociating Member or Resig	gning Manager	30 FL
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		