L21000109170

(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



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COVER LETTER

то:		stration Section sion of Corporations		
SUBJ	ECT:	Skate Away Roller Rink, LLC		
		(Name of Lin	rited Liability Cor	ubani,)
The ea	nelose	d member, resignation or dissoc	iation and fee(s	e) are submitted for filing.
Please	e returi	all correspondence concerning	this matter to:	
Tatian	a E. Da	avid		
		(Contact Person)	_	-
Skate	Away F	Roller Rink, LLC		
		(Firm/Company)		-
12308	SW 25	SIST ST		_
		(Address)		
НОМЕ	STEA	D, FL 33032		
	•	(City/State and Zip Code)	-,:-,- -	-
For fu	irther i	nformation concerning this mat	ter, please call:	
Tatian	a David	t	786 at (728-6114
	4)	lame of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclo	sed ple	ease find a check made payable	to the Florida L	Department of State for:
□ \$2	5 Filin	g Fee	■ \$55 Filing	g Fee & Certified Copy
	Maili	ng Address:		Street Address:
		stration Section		Registration Section
	Divi	sion of Corporations		Division of Corporations
		Box 6327		The Centre of Tallahassee
	Talla	hassee, F1, 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)

1. The name o		s it appears on the records of the Flor ay Roller Rink, LLC.	ida Depa	artment	l
of State is:	Skale Awa	——————————————————————————————————————		·	
2. The Florida	document/registration number a L21000109170	assigned to this limited liability compa	any is:		
3. The date th	is member/manager withdrew/res	signed or will withdraw/resign is:	21/2021		
4.1,	Pagual M. Da La Oca	, hereby withdraw/resign as a			
	Print Name of Person Resigning)	,			
	Manager			53	
	(Print Title)			121	
of this limite	ed liability company and affirm th	he limited liability company has been	notified	de l'imp	٠
resignation i		SA.	<u> </u>	29 PM	مساد ا ا ا ا ا ا
Signature	of Dissociating Member or Resig	gning Manager	usin'	1:18	
Filing Fee:	\$25.00 (Required)				

Certified Copy:

\$30.00 (Optional)



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)

		as it appears on the records of the Flow way Roller Rink, LLC.			
or state is.					-
2. The Florida doci	.ment/registration number	assigned to this limited liability comp	any is:		
	L21000109170	·			
3. The date this me	mber/manager withdrew/re	esigned or will withdraw/resign is:	/21/2021		•
4. I.	Raquel M. De La Osa	, hereby withdraw/resign as a	<u>:</u> _		
(Print N	ame of Person Resigning)		É	1 27	
	Manager		<u> </u>	2021 JUN 29	:
	(Print Title)		Ď.	29	:
of this limited lia resignation in wr	bility company and affirm iting.	the limited liability company has been	notifie LORIDA	d ∰ -: 18	ıy
Signature of D	ssociating Member or Res	igning Manager			
	\$25.00 (Required)				
Certified Copy:	\$30.00 (Optional)				