

L21 000129 888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Card M Remodeling & Home Improvements LLC
(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:

Michael T. Lane
(Contact Person)

Card M
(Firm/Company)

3060 NE 13th Ave
(Address)

Fort Lauderdale FL 33064
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael T. Lane at (315) 251-4601
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

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

From: Mykel Lane candmhomesolutions5@gmail.com

Date: Apr 15, 2022 at 5:29:36 PM

To: allon89@yahoo.com



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 Department of State is: Cand M Remodeling and Home Improvement LLC

2. The Florida document/registration number assigned to this limited liability company is:

L210001129888

3. The date this member/manager withdrew/resigned or will withdraw/resign is: April 1, 2022

4. I, Agustine Christian, hereby withdraw/resign as a

(Print Name of Person Resigning)

MBP

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

[Signature]
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)