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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GFS TAX & ACCOUNTING SERVICES

Account Number : I20140000089 Phone : (754)301-2128

Fax Number : (954)252-4650

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: INFO@GFSTAXACCT.COM

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SMART GENERAL ELECTRIC LLC

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The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

H21000155762 3

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SMART GENERAL ELECTRIC LLC SUBJECT:	
(Name of Limited Liability (	(lompany)
The enclosed member, resignation or dissociation and fe	e(s) are submitted for filing.
Please return all correspondence concerning this matter t	to:
JULIANA MACHADO	202
(Contact Person)	
GES TAX & ACCOUNTING SERVICES	2021 APR 19
(Firm/Company)	
11764 W SAMPLE RD STE 102	PH 4: 46
(Address)	, in o
CORAL SPRINGS, FL 33065	
(City/State and Zip Code)	
For further information concerning this matter, please ca	ıll:
JULIANA MACHADO 754	301-2128
(Name of Contact Person) (Area Co	ode & Daytime Telephone Number)
Enclosed please find a check made payable to the Florid ☐ \$25 Filing Fee ☐ \$55 Fil	a Department of State for: ing Fee & Certified Copy
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations

CR2E079 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

H210001557623



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216; Plorida Statutes)

·	limited liability company as it appears OENERAL PLECTRIC LLC	ars on the records of the Flor	ida Depar	Men Wall
2. The Florida doc	ument/registration number assigned	to this limited liability compa	iny is:	5
1,21090145775			.⊒i -5, -i	7
3. The date this mo	mber/manager withdrew/resigned o	r will withdraw/resign is: 04/1	6/2021	9+:+5
(Print N	'AIO h hame of Person Resigning)	arooy mundanmonaga aa a		
AMBR				
,	(Print Mile)			
of this limited lis resignation in wr	bility company and affirm the limite iting.	ed tiability company has been	notified o	fmy
Signature of Di	ssociating Member or Resigning M	avadoi		
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			