

L21000176048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

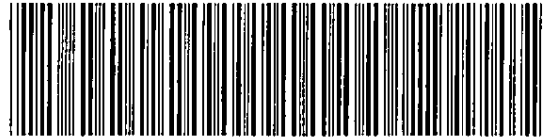
(Business Entity Name)

(Document Number)

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6-5-1 2023

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL PRO RESTORATION IP HOLDINGS, LLC.

(Name of Corporation)

DOCUMENT NUMBER: L21000176048

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alejandro Velasquez

(Name of Person)

ALL PRO RESTORATION IP HOLDINGS, LLC.

(Name of Firm/Company)

13331 SW 132ND AVENUE UNIT 6

(Address)

MIAMI, FL 33186

(City/State and Zip Code)

For further information concerning this matter, please call:

Alejandro Velasquez

at (305) 469-6441

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Winston Castaneda, hereby resign as Co-Owner
(Title)

of ALL PRO RESTORATION IP HOLDINGS, LLC.
(Name of Corporation)

L21000176048, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
JUL 13 - 5
PM 9:39
2010

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314