121000334912

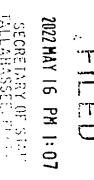
(Re	equestor's Name)	
(Ad	ldress)	
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(0)		-
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
ocianica dopico		
Special Instructions to	Filing Officer:	
	J. HORNE	
J	IUL 2 0 2022	

Office Use Only



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COVER LETTER

fO: Regis	stration Section		
Divis	sion of Corporations		
SUBJECT:	AJL AUTO SALE LLC		
	(Name of Lim	ited Liability Co	ompany)
The enclosed	1 member, resignation or dissoci	ation and fee	(s) are submitted for filing.
r icase return	an correspondence concerning	this matter to	o:
Jouset Ayata A	vues		
	(Contact Person)		
AJL AUTO S	ALE LLC		
	cz irm/Company)		_
.989 AVE S N	W		
	Address)		
	. radicas e		
win TER HAV	ZEN FLORIDA 33881		
	or sty/State and Zip Code)	·····	
ror turther tr	nformation concerning this matt	er, please cal	l:
JUUSET AYA	I. AVILES	863 t.(595-8532
V; }	aine of Contact Person)	(Area Coc	le & Daytime Telephone Number)
irnciosed nie	ase find a check made payable (o the Florida	Department of State for:
☐ \$25 Filing			ng Fee & Certified Copy
	-		
Mailir	ng Address:		Street Address:
	stration Section		Registration Section
	sion of Corporations		Division of Corporations
	Box 6327		The Centre of Tallahassee
fallai	hassee, FL 32314		2415 N. Monroe Street, Suite 810
			l'allahassee, FL 32303

c.R2E079 (2/14)





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)

	limited liability company as it appears on the records of the Florida Department AUTO SALE LLC
2. The Florida docu	ument/registration number assigned to this limited liability company is:
£21000234912	
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:
4. I,	les hereby withdraw/resign as a
iPrint N	les, hereby withdraw/resign as a, hereby withdraw/resign as a,
Manager	
	(Print Title)
of this limited lial resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of Di	Ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	