## 121000254099

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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Special Instructions to Filing Officer:			



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08/16/21--01023--015 ++25.00



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## **COVER LETTER**

7		istration Section ision of Corporations			
S	SUBJECT	Hadar M and S LLC			
		(Name of Limited Liability Company)			
7	The enclosed member, resignation or dissociation and fee(s) are submitted for filing.				
L	lease retur	:			
N	Michael Hada	ìΓ			
_	(Contact Person)				
ŀ	Hadar M and S LLC				
_	(Firm/Company)  9201 NW 14TH STREET  (Address)  Plantation, FL 33322  (City/State and Zip Code)				
9					
_					
Г					
_					
F	For further	information concerning this	:		
}	Marc Boisseau		561 at (	495-5250	
_	(Name of Contact Person)			e & Daytime Telephone Number)	
	Enclosed please find a check made payable to the Florida Department of State for:  \$\Begin{align*} \Boxed{\text{Piling Fee}} & \Boxed{\text{Certified Copy}} \end{align*}				
5	= 323 1 1111 7	ig i cc	اااا ا ددو پ	ig ree ac certified copy	
unchael Hadar will sent	Mail Reg Div P.O Tall	ing Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, F1, 32303	

CR2E079 (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)

t11	limited liability company as it appears on the records of the Florida Department M and S LLC
of State is:	M and S LUC.
2. The Florida doci 1.21000254099	ment/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 8/1/2021
4. I. Shie Hadar	, hereby withdraw/resign as a, hereby withdraw/resign as a
Manager	ame oj i erson kengning)
	(Prim Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Optional)