Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000337899 3)))



H220003378993ABCA

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : YOBI TECHNOLOGY, LLC

Account Number : I20200000112 Phone : (407)832-7240 Fax Number : (407)612-2313

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

Email Address: ACCOUNTING @ EXCELTOTAL BUSINESS. COM

2022 OCT -5 AM II: 33 I

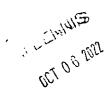
LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AUTHORITY AUTO SALES LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help



To:

COVER LETTER

TO:		stration Section ion of Corporations		
SUBJ:	ECT:	AUTHORITY AUTO SALES, LLC	<u> </u>	
		(Name of Limite	ipany)	
The er	nclosed	l member, resignation or dissociat	ion and fee(s) are submitted for filing.
Please	return	all correspondence concerning th	is matter to:	
ANTO	NIO CA	RDOSO		_
		(Contact Person)		
EXCE	L TOTA	L BUSINESS		_
		(Firm/Company)		
7065 V	VESTPO	DINTE BLVD SUITE#301		_
		(Address)		
ORLA	NDO, F	FL 32835		_
		(City/State and Zip Code)		
For fu	irther i	nformation concerning this matter	, please call:	
ANTO			407 at (351-6656 & Daytime Telephone Number)
	()	lame of Contact Person)	(Area Code	& Daytime Telephone Number)
	sed ple 5 Filin	ease find a check made payable to g Fee	the Florida D	Department of State for: g Fee & Certified Copy
	Regi Divi: P.O.	ng Address: stration Section sion of Corporations Box 6327 shassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)

To:



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)

2. The Florida docu	ument/registration number ass	signed to this limited liability company is:
	mber/manager withdrew/resig	gned or will withdraw/resign is:
	OF COTTUO MAN AND AND AND AND AND AND AND AND AND A	, hereby withdraw/resign as a
MANAGER	ame of rerson Resigning	
of this limited lial resignation in wr		limited liability company has been notified of my
Signature of Di	sociating Member or Resign	ing Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	