121000421798

(Requestor's Name)
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09/29/22--01013--015 **25.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Lab USA, LLC	
(Name of Limited Liability Co	ompany)
The enclosed member, resignation or dissociation and fee((s) are submitted for filing.
Please return all correspondence concerning this matter to	:
Christian Rojas	_
(Contact i eson)	
(Firm/Company)	_
5910 post Blvd Unit 110401	_
(Address)	
Bradenton FC 34211	_
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at 1941 (Area Code	387-5674
(Name of Contact Person) (Area Code	e & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida I	Department of State for:
\$25 Filing Fee	g Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303



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)

1. The name of the	limited liability company	a it announce on the records of	the Florida Denortment
		s it appears on the records of	·
of State is:	Lab USA, LLC		
2. The Florida doc	ument/registration number a	ssigned to this limited liabilit	y company is:
L2100	0421798	<u></u> -	
3. The date this me	mber/manager withdrew/res	signed or will withdraw/resign	n is: 9/1/22
4. I. Christian (Print N	an Rojas Jame of Person Resigning)	, hereby withdraw/resig	n as a
Munag	EV (Print Title)		
of this limited lia resignation in wr		he limited liability company h	as been notified of my
Signature of Di	ssociating Member or Resig	gning Manager	
			2022 SEI
Filing Fee:	\$25.00 (Required)		<u>~</u>
Certified Copy:	\$30.00 (Optional)		89