L21000518182

(Re	equestor's Name)				
(Ad	ddress)				
(, , ,					
(Address)					
(City/State/Zip/Phone #)					
					
PICK-UP	☐ WAIT ☐ MAIL				
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(Bu	usiness Entity Name)				
(Do	ocument Number)				
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Certified Copies	Certificates of Status				
Special Instructions to	Filing Officer:				
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920A Kennedy Drive Key West, FL. 33040

Date: 09/16/2023 Number of pages including cover sheet

pages: 5 To: From: Sec. of State JOHN MOEN To whom it may concern,

Please process the enclosed RESIGNATION posting for Mercil, LLC, document # L21000518182.

Any questions, please call.

Thank you

John Moen E.A.

Liberty Tax Phone #1-305-453-6642 Liberty Tax Fax #1-305-328-6618

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<u>CC:</u>	,
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Remarks:

Urgent

For your review

Reply ASAP

Please Comment

This message is intended only for the use of the recipient and may contain information that is confidential or privileged. If you receive this communication in error, please call us at 1-305-453-6642 and return the original and all copies to us by mail. Reimbursement of your postage expense is assured. Thank you.

COVER LETTER

	Registration Section Division of Corporations				
	MERCH LLC				
SUBJEC		(Name of Limited Liability Company)			
The encl	osed member, resignation or disso	ciation and fee(s) are submitted for filing.		
Please re	turn all correspondence concerning	g this matter to:			
JOHN MC	DEN				
	(Contact Person)		_		
LIBERTY	TAX				
	(Firm/Company)		_		
920A KEN	NNEDY DRIVE				
	(Address)		_		
KEY WES	ST FL 33040				
	(City/State and Zip Code)		_		
For furth	er information concerning this ma	tter, please call:			
JOHN MO	DEN	305 at (453-6642		
	(Name of Contact Person)		e & Daytime Telephone Number)		
	l please find a check made payable		-		
■ \$25 F	iling Fee	□ \$55 Filin	g Fee & Certified Copy		
R	<u>Tailing Address:</u> Legistration Section		Street Address: Registration Section		
	Division of Corporations 2.0. Box 6327		Division of Corporations The Centre of Tallahassee		
	fallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 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)

	limited liability company	as it appears on the records of the Florida Department
2. The Florida docs	ument/registration number	r assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/	resigned or will withdraw/resign is:
DODERT MEDCH		, hereby withdraw/resign as a
(Print N	lame of Person Resigning)	, nereby withdrawnesign as a
AMBR		
	(Print Title)	- '
of this limited lia resignation in wr		n the limited liability company has been notified of my
Signature of D	issociating Member or Re	signing Manager
	\$25.00 (Required) \$30.00 (Optional)	