

4220000 12804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

07/01/22--01011--021 +\$55.00

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FILED
SECRETARY OF STATE
DEPARTMENT OF CORPORATIONS
OCT 03 2022
2022 JUL - 1 AM 8:28

J. DEAN
OCT 03 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 75 Towing and Recovery
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Mark Fernandez
(Contact Person)

75 Towing and Recovery LLC
(Firm/Company)

421 Tangerine Dr
(Address)

Oldsmar, FL 34677
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Fernandez at (727) 900-1374
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
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 as it appears on the records of the Florida Department of State is: 75 Towing and Recovery LLC

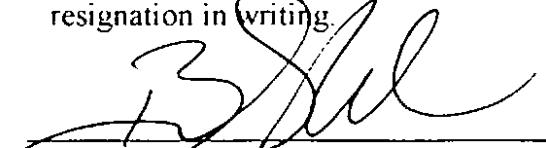
2. The Florida document/registration number assigned to this limited liability company is: L22000012 804

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/25/2022

4. I, Back Pham, (Print Name of Person Resigning), hereby withdraw/resign as a

Manager Partner
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)



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 as it appears on the records of the Florida Department of State is: 75 Towing and Recovery LLC

2. The Florida document/registration number assigned to this limited liability company is:

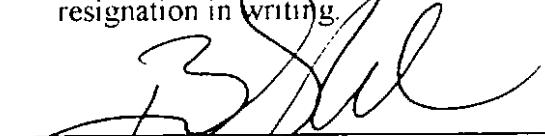
L22000012804

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/25/2022

4. I, Bach Pham,
(Print Name of Person Resigning)

Manager Partner
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.


Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)