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| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ddress) | |
| (A | ddress) | |
| (Ci | ity/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bi | usiness Entity Nar | ne) |
| (D: | ocument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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S. PRATHER

COVER LETTER,

TO: Registration Section Division of Corporations ATA PROPERTY REMODELING LLC SUBJECT: (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: LUIS MAURY (Contact Person) ATA PROPRETY REMODELING LLC (Firm/Company) 3000 CRANE TRADE CIR LOT 758 (Address) APOPKA FL 32703 (City/State and Zip Code) For further information concerning this matter, please call: **LUIS MAURY** 407 (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: 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

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)

| | c limited fiability company as PROPERTY REMODELING LLC | s it appears on the records of the Florida Department |
|--------------------|---|---|
| 2. The Florida doc | ument/registration number a | ssigned to this limited liability company is: |
| LING AGALIDA | | igned or will withdraw/resign is: 05/24/2022, hereby withdraw/resign as a |
| (Print) MANAGER | | |
| resignation in w | riting. Maur | ne limited liability company has been notified of my |
| Filing Fee: | issociating Member or Resig \$25.00 (Required) \$30.00 (Optional) | ning Manager >: :-: |

Date of this notice: 02-23-2022

Employer Identification Number:

99-3841787

Form: SS-4

Number of this notice: CP 575 G

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

TLADINIR TORREALSA A1A PROPERTY REMODELING 2839 CRANE TRACE CIR ORLANDO, FL 32837

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 98-0841787. This EIN will identify you, your business accounts, tax returns, and administ, even if you have no employees. Please keep this notice in your permanent records.

Taxpayers request an BIM for their business. Some taxpayers receive CP575 notices when another person has stolen their identity and are opening a business using their information. If you did **not** apply for this EIM, please contact us at the phone number or address listed on the top of this notice.

When filling tax bocuments, making payments, or replying to any related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear-off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a comporation. If the LLC is eligible to be treated as a comporation that meets certain tests and it will be electing S comporation status, it must timely file Form 2553, Election by a Small Business Comporation. The LLC will be treated as a comporation as of the effective date of the S comporation election and does not need to file Form 9832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-515-329-3676 (TTY/TOD 1-505-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- 1. Use this ETM and your name exactly as they appear at the top of this notice on all Your federal tax forms.
- * Refer to this ETM on your tex-related correspondence and documents.
- * Provide future officers of your organization with a copy of this notice.

Your name control associated with this EIN is TOPR. You will need to provide this information along with your EIN, if you file your seturns electronically.

Safeguard your EIN by referring to Publication 4557, Safeguarding Taxpayer Data: A Guide for Your Business.

You can get any of the forms or publications mentioned in this letter by visiting our website at www.irs.gov/forms-pubs or by calling 800-TAX-FORM (800-829-3676).

If you have questions about your EIN, you can contact us at the phone number or address listed at the top of this notice. If you write, please tear off the stub at the bottom of this notice and include it with your letter.

Thank you for your cooperation.

keep this part for your records.

CP 875 G (Rev. 7-2007)

Foluer this part with any correspondence so we may identify your account. Please currect any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS MOTICE: 02-23-2022)

EMPLOYER IDENTIFICATION NUMBER: 98-0841787

FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 Idealah kabalah dalah da

VLADIMIR TORREALBA Ala PROPERTY REMODELING 2839 CRAME TRACE CIR ORLANDO, FL 32637