

L22000095846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

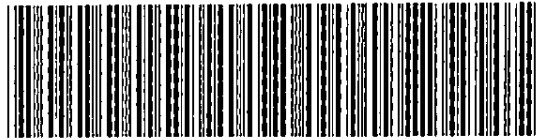
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/07/23--01011--011 **25.00

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2023 FEB -7 PM 12:41
CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VAN SKY SERVICES LLC
(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:

JAIME M SUAREZ PLATA
(Contact Person)

VAN SKY SERVICES LLC
(Firm/Company)

4731 CASON COVE DR. APTD 1319
(Address)

ORLANDO, FLORIDA 32811
(City/State and Zip Code)

For further information concerning this matter, please call:

JAIME M SUAREZ PLATA at 321 3184955
(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: VAN SKY SERVICES LLC

2. The Florida document/registration number assigned to this limited liability company is:
L22000095846

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/28/2023

4. I, CARLOS A MANZANILLA MENDOZA, hereby withdraw/resign as a
(Print Name of Person Resigning)
MANAGER
(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

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

FILED
FEB - 7 PM 12:42
CLERK OF STATE
TALLAHASSEE, FL

CR2E079 (2/14)

State of Florida
County of Orange
On this 28 day of January, 2023
before me personally appeared
CARLOS A MANZANILLA MENDOZA
to me known to be the person who executed the
foregoing instrument, and acknowledged that he
executed the same as his free act and deed.
SEAL (signed) [Signature]
NOTARY PUBLIC



MARINA VAZQUEZ
Commission # GG 345799
Expires October 15, 2023
Bonded Thru Budget Notary Services