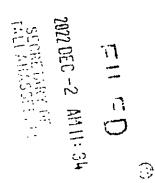
Laa000444159

| | (Requestor's Name) | | | |
|-------------------------|--------------------------|--|--|--|
| | | | | |
| | (Address) | | | |
| | (Address) | | | |
| | (7.001.033) | | | |
| | (City/State/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| | (Business Entity Name) | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to | Filing Officer: | | | |
| | J. HORNE DEC 1 2002 | | | |
| | | | | |

Office Use Only



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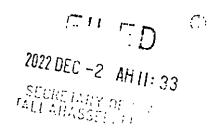
2022 DEC -2 AH II: 18

COVER LETTER

| _ | stration Section sion of Corporations | | · |
|---------------|---------------------------------------|----------------------|---|
| SUBJECT: | Jacko AutoSales LLC | | |
| 5655561. | | Limited Liability Co | mpany) |
| The enclose | d member, resignation or diss | ociation and fee(| s) are submitted for filing. |
| Please retur | n all correspondence concerni | ng this matter to: | : |
| Janneth Torre | S | | |
| ····· | (Contact Person) | • | _ |
| Jacko AutoSa | les LLC | | |
| | (Firm/Company) | | _ |
| 4027 W Dr M | artin Luther King Jr Blvd | | |
| | (Address) | | |
| Tampa, FL 33 | 614 | | |
| | (City/State and Zip Code) | | _ |
| For further i | information concerning this m | atter, please call: | : |
| Janneth Torre | S | 813 at (| 570-3501 |
| () | Name of Contact Person) | (Area Code | e & Daytime Telephone Number) |
| Enclosed ple | ease find a check made payab | le to the Florida I | Department of State for: |
| ■ \$25 Filin | • - | | g Fee & Certified Copy |
| Maili | ing Address: | | Street Address: |
| Regi | stration Section | | Registration Section |
| | sion of Corporations | | Division of Corporations |
| | Box 6327 | | The Centre of Tallahassee |
| 1 8118 | nhassee, 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 Depar | tment |
|---|--|-------|
| 2. The Florida docu | ment/registration number assigned to this limited liability company is: | |
| 3. The date this me | mber/manager withdrew/resigned or will withdraw/resign is: | |
| Carolina Romero | | |
| Manager | Print Title) | |
| of this limited lial resignation in wr | pility company and affirm the limited liability company has been notified of ting. | of my |
| Signature of Di | ssociating Member or Resigning Manager | |
| | \$25.00 (Required) \$30.00 (Optional) | |