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(Business Entity Name)	
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COVER LETTER

Division of Corporations HERE FOR YOU MOBILE NOTARY SERVICES, 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: Alba Gaston (Contact Person) HERE FOR YOU MOBILE NOTARY SERVICES, LLC (Firm/Company) 6742 FOREST HILL BLVD., #123 (Address) GREENACRES, FL 33413 (City/State and Zip Code) For further information concerning this matter, please call: ري at (______) 324-9560 (Area Code & Daytime Telephone Number) Alba Gaston (Name of Contact Person) Enclosed please find a check made payable to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy ■ \$25 Filing Fee Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Registration Section



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 fiability company FOR YOU MOBILE NOTAR	as it appears on the records of the Florida De	epartment
2. The Florida docu L23000017573	imen√registration number	assigned to this limited liability company is	
3. The date this me	mber/manager withdrew/r	resigned or will withdraw/resign is:	
Locus Gaston		, hereby withdraw/resign as a	ح
Manager	(Print Title)		
of this limited liab resignation in wri	• •	the limited liability company has been notifi	ed of my
Signature of Di	Saston Sociating Member or Res	signing Manager	
	\$25.00 (Required) \$30.00 (Optional)		