00045578

(Requestor's Name)
(Address)
(Address)
ICity/State/7in/Dhaga #0
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

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COVER LETTER

•	stration Section sion of Corporations		
SUBJECT:	TOTAMILLIC		
	(Name of	Limited Liability Co	mpany)
The enclose	d member, resignation or dis	sociation and fee(s) are submitted for filing.
Please return	n all correspondence concern	ing this matter to:	
Jordan Lulich			
	(Contact Person)		_
	(Firm/Company)		_
1069 Main Su	reet		
***	(Address)		_
Sebastian, Flo	rida 32958		
	(City/State and Zip Code)		_
For further i	nformation concerning this r	natter, please call:	
Jordan Lulich		772 at (589-5500
(2)	Name of Contact Person)		e & Daytime Telephone Number)
Enclosed ple \$25 Filin	ease find a check made payal g Fee		Department of State for: g Fee & Certified Copy
Regi Divi	ng Address; stration Section sion of Corporations Box 6327		Street Address: Registration Section Division of Corporations
	ahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E079 (2/14)



June 21, 2023

JORDAN LULICH 1069 MAIN STREET SEBASTIAN, FL 32958

SUBJECT: TOTAMI LLC Ref. Number: L23000045578

We have received your document for TOTAMI LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please enter a date that the member/manager withdrew/resigned or will withdraw/resign in number 3 of the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

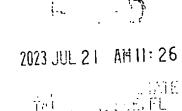
Letter Number: 223A00013982

Claretha Golden Regulatory Specialist II

www.sunbiz.org

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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 Department AMI LLC
2. The Florida doci	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is:, hereby withdraw/resign as a lame of Person Resigning)
MANAGER	(Print Title)
resignation in wr	•
2010	Securiting Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)