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2023 DEC 22 AM II: 43
SECRETARY OF SIATI

COVER LETTER

TO: Registration Section Division of Corporations			
GCS DEPARTMENT STO	RE LLC		_
(Nan	ne of Limited Liability C	ompany)	
The enclosed member, resignation or	dissociation and fee	e(s) are submitted for filing.	
Please return all correspondence con-	cerning this matter to):	~ 3
Carola Olses		ە چۈ	023 D
(Contact Person)			
Cales W LLC			18.4.0 18.4.0
(Firm/Company)	i		かデ カひ.
1025 E Hallandale Beach Blv Ste 15 # 921		· 	門門
(Address)			
Hallandale Beach Fl 33099			
(City/State and Zip Co	de)		
For further information concerning the	his matter, please cal	I:	
Carola Olses	786 at (5699706	_
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number	.)
Enclosed please find a check made p ■ \$25 Filing Fee		Department of State for: ng 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, Suit Tallahassee, FL 32303	te 810

TO:



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 Departn	nent
of State is: GCS	DEPARTMENT STORE LLC		20.°	
2. The Florida doc 1.23000190626	ument/registration number as	ssigned to this limited liability c	22 AH2 AH2	
3. The date this me	ember/manager withdrew/resi	igned or will withdraw/resign is	05/05/2023 2 S: 05/05/2023 2 S: 15 a 2	نا انا از احید افور با ا
4. l. Natalia Ledezma	ı 	, hereby withdraw/resign a	is a FATE 43	
(Print N	ame of Person Resigning)			
Manager				
	(Print Title)			
of this limited lia resignation in wr		e limited liability company has	been notified of	my
Signature of Di	ssociating Member or Resign	ning Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			