123000215040

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #/)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(00	cument Number)	
(50	outhern ruthbery	
Certified Copies	_ Certificates of	Status
Special Instructions to Filing Officer.		





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COVER LETTER

Registration Section

TO:

Division of Corporations Phoenix Marine 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: Ronald Paxton (Contact Person) Phoenix Marine Sewrvices LLC (Firm/Company) 11120 N Harmony Lake cir. (Address) Davie, FL, 33324 (City/State and Zip Code) For further information concerning this matter, please call: 2740920 754 Ronald Paxton at (_____ (Area Code & Daytime Telephone Number) (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 Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314 Tallahassee, FL 32303



DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

Phoe	limited liability company as it appears on the records of the Florida Department nix Marine Services LLC
2. The Florida doc L23000215040	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
4. I, (Print)	Hereby withdraw/resign as a same of Person Resigning)
Men	
of this limited lia resignation in w	bility company and affirm the limited liability company has been notified of my iting.
-W	tardin
Signature of D	issociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)