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Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : ACCOUNT BOOKKEEPING CORP  
Account Number : 120120000055  
Phone : (407)898-1757  
Fax Number : (407)897-5336

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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Email Address: Support@abkcorp.com

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ELEGANT TOWING & RECOVERY LLC

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MAR 11 2024

T. LEMIEUX

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ELEGANT TOWING & RECOVERY LLC  
(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:

JOSE ALBERTO LEMUS

(Contact Person)

ABK CORP

(Firm/Company)

5301 CONROY ROAD SUITE 140

(Address)

ORLANDO FL 32811

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSE ALBERTO LEMUS

407

898-1757

at ( )

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing 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, Suite 810  
Tallahassee, FL 32303



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 Department of State is: ELEGANT TOWING & RECOVERY LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L24000070582
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/01/2024
4. I, FERNANDO MARCIO LOPES, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
AMBR  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Dissociating Member or Resigning Manager

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