

L 240002354151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

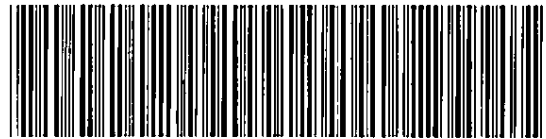
(Document Number)

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2024 JUN 17 AM 5:22  
FBI - LEB



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: Agency of Numbers LLC

2. The Florida document/registration number assigned to this limited liability company is: 700430251817

3. The date this member/manager withdrew/resigned or will withdraw/resign is: June 7, 2024

4. I, Kathleen Mary Mandel, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Member and Director  
(Print Title)

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

K M Mandel

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Agency of Numbers 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:

~~Luz Rivera~~ \_\_\_\_\_  
\_\_\_\_\_  
(Contact Person)

Agency of Numbers LLC  
\_\_\_\_\_  
(Firm/Company)

1500 Presidential Way, Apt 701  
\_\_\_\_\_  
(Address)

West Palm Beach, Florida 33401.  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Luz Rivera \_\_\_\_\_ 561 325 3335  
\_\_\_\_\_ 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