

L24000 282508

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

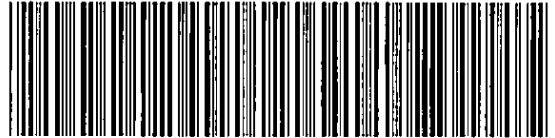
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

J. HORNE  
SEP - 6 2024

Office Use Only



600435545466

08/30/24--01026--021 \*\*25.00

FILED  
2024 AUG 30 PM 3:22  
CLERK  
COURT

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Dissociation of Member of 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:

Joshua Mulrenin

\_\_\_\_\_  
(Contact Person)

Island Transportation Services LLC

\_\_\_\_\_  
(Firm/Company)

1585 Bunting Lane

\_\_\_\_\_  
(Address)

Sanibel, FL 33957

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua Mulrenin

586 909-5674

\_\_\_\_\_  
(Name of Contact Person)

at (\_\_\_\_\_) \_\_\_\_\_  
(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

FILED  
2024 AUG 30 PM 3:22  
ESTATE

**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: Island Transportation Services LLC

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

L24000282508

3. The date this member/manager withdrew/resigned or will withdraw/resign is: Aug. 1, 2024

4. I, Kevin Mulrenin, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Member and Manager

*(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

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