## M13 0000004824

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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: A1C HOLDINGS, LLC		
(Name of Limited Liability Company)		
The enclosed member, resignation or dissociation	n and fee(s) are submitted for filing.	
Please return all correspondence concerning this	matter to:	
STEVEN KING		
(Contact Person)		
A1C HOLDINGS, LLC		
(Firm/Company)		
7261 SHERIDAN STREET, SUITE 220		
(Address)		
HOLLYWOOD, FL 33024		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
STEVEN KING	305 455-3862	
	Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the Florida Department of State for:  □ \$25 Filing Fee		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CR2E079 (2/14)



## 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)

l. The name of the limited liability of State is:	company as it appears on the records of the Florida Department  LC
2. The Florida document/registration M13000004824	n number assigned to this limited liability company is:
3. The date this member/manager w	ithdrew/resigned or will withdraw/resign is:
4. I. RYAN CRAIG	<b>3</b> .5 20
(Print Name of Person Resig	, hereby withdraw/resign as a 口贯 写
MANAGER (MGR)	, hereby withdraw/resign as a many series of the series of
(Print Title)	
of this limited liability company ar resignation in writing.	nd affirm the limited liability company has been notified of my
Signature of Dissociating Memb	er or Resigning Manager
Filing Fee: \$25.00 (Requ Certified Copy: \$30.00 (Option	·