M17000004568

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Registration Section

TO:

Division of Corporations Professional Technology Repairs, 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: James Martin (Contact Person) **ACM Capital Partners** (Firm/Company) 2103 Coral Way Suite 604 (Address) Miami, FL 33145 (City/State and Zip Code) For further information concerning this matter, please call: Tiffany Augusta (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: Street Address: Registration Section Registration Section **Division of Corporations** Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 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 Depa	rtment
of State is: Profe	ssional Technology Repairs, LLC		·
2. The Florida doct M17000004568	umen√registration number a	ssigned to this limited liability company is:	
3. The date this me	mber/manager withdrew/res	igned or will withdraw/resign is: 5/7/2020	
4. I, James F. Martin (Print N	ame of Person Resigning)	hereby withdraw/resign as a	
CEO			
<u></u>	(Print Title)		
of this limited lia resignation in wr		e limited liability company has been notified	of my
James F Martin James F Martin May 8, 2020:			
Signature of Di	ssociating Member or Resig	ning Manager	
-	\$25.00 (Required) \$30.00 (Optional)		2020 HA