

3/9/2021

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GFS TAX & ACCOUNTING SERVICES  
Account Number : I20140000089  
Phone : (754)301-2128  
Fax Number : (954)252-4650

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@gfstaxacct.com

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ONEPOINT SOLUTIONS IN TECHNOLOGY LLC**

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Corporate Filing Menu

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4/23/21

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ONEPOINT SOLUTIONS IN TECHNOLOGY 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:

GILVAM F DOS SANTOS

(Contact Person)

GFS TAX & ACCOUNTING SERVICES

(Firm/Company)

11764 W SAMPLE RD STE 102

(Address)

CORAL SPRINGS FL 33065

(City/State and Zip Code)

For further information concerning this matter, please call:

GILVAM F DOS SANTOS

(Name of Contact Person)

at ( 957 )

(Area Code & Daytime Telephone Number)

9573244

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

CR2E079 (2/14)



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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONSFILED  
2021 MAR 10 PM 5:45  
TALLAHASSEE, FLORIDA**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: ONEPOINT SOLUTIONS IN TECHNOLOGY LLC

2. The Florida document/registration number assigned to this limited liability company is:  
M17000006890

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 03/08/2021

4. I, CALIL NETO, ABDO, hereby withdraw/resign as a  
(Print Name of Person Resigning)

MGR

(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)