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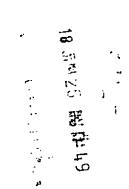
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COVER LETTER

TO:	Registration Section
	Division of Cornoration

SUBJECT: ZYLBA SERVICES. LLC

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

ALDO MURGUIA

ZYLBA SERVICES LLC

4910 NE 18 TER, APT.3

F- LAUDEDDALE F 27200

(City/State and Zip Code)

For further information concerning this matter, please call:

ALDO MURGUIA at (754) 214

Enclosed please find a check made payable to the Florida Department of State for:

\$\Pi\$ \$25 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

CR2E079 (2/14)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

2018 JUN 25 PM 2: 01



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	e limited liability	company as it app	pears on the	records of the	: Florida Dep	partment	
of State is:	ZYLBA	SERVI	ŒS	LLC			
2. The Florida doc	ument/registratio	~ ·	d to this lin	nited liability o	company is:		
3. The date this me	ember/manager v	vithdrew/resigned	or will with	hdraw/resign is	s <u>OI-0</u>	1-18	
4.1. JUAN		RGUIA					
	AGER (Print Title)						
of this limited lia resignati on in w		and offirm the limi	ted liability	company has	been notified	ເ ລ	
	Publich				; ;	िम 75 70 (7)	
Signature of D	issociating Mem	ber or Resigning A	vlanager		::	61 電腦	
Filing Fee: Certified Conv.	\$25.00 (Req \$30.00 (Opt	•			э. 41 г, р-	61	