

# L 120000 15816

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

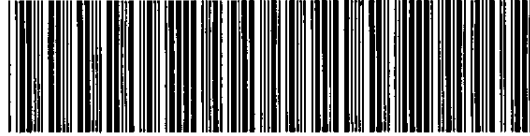
(Business Entity Name)

(Document Number)

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

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06/15/15--01041--014 \*\*55.00

FILED  
2015 JUN 29 AM 12  
TALLAHASSEE FLORIDA  
CLERK OF SUPERIOR COURT

K. SALLY  
EXAMINER  
JUN 30 2015



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 16, 2015

BECKLES & CO.  
MARIO BECKLES  
14 NE 1ST AVE, STE. 805  
MIAMI, FL 33132

SUBJECT: ANGRA LLC  
Ref. Number: L12000015816

RECEIVED  
15 JUN 29 PM 3:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for ANGRA LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only one member resignation document per fee. You have submitted three documents with only one fee. To file all three of these documents we will need the fees for the other two documents.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 015A00012557



June 26, 2015

Karen A. Saly  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Karen,

I received your letter dated June 16, 2015. I have enclosed the letter and the three resignation of member forms with this mailing. Also, I would like to disregard my request for certified copies and have the balance of \$55 applied to the regular filing for which is \$25. Given that I have three members that need to be removed from Angra LLC I have enclosed a check of \$20 to cover the \$75 filing fee for removing three members.

Kind Regards,

A handwritten signature in black ink, appearing to read "Mario Beckles", with a long horizontal flourish extending to the right.

Mario Beckles, CPA  
Managing Director

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ANGRA 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:

**Mario Beckles**

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

**Beckles & Co.**

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

**14 NE 1St Avenue, Suite 805**

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

**Miami, FL 33132**

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

For further information concerning this matter, please call:

**Mario Beckles**

at **786 512-5016**

\_\_\_\_\_  
(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

**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



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

FILED  
2015 JUN 29 AM 10:12  
STATE DEPARTMENT OF STATE  
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: ANGRA LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L12000015816

3. The date this member/manager withdrew/resigned or will withdraw/resign is: March 27, 2015

4. I, Jorgelina Rossi, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
Manager  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

DocuSigned by:

Jorgelina Rossi

Signature of Dissociating Member or Resigning Manager

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