

L15 00016258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

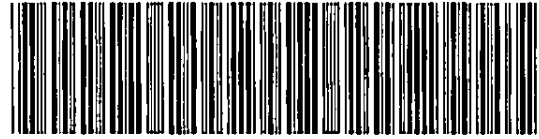
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 AUG 22 AM 7:19
MAIL ROOM
TALLAHASSEE, FLORIDA



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 Department of State is: Damasquina, LLC

2. The Florida document/registration number assigned to this limited liability company is: 15000162858

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 08/09/2017

4. I, Maria C Acosta, 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.

M. Acosta
Signature of Dissociating Member or Resigning Manager

17 AUG 22 AM 7:18
TALLAHASSEE, FLORIDA