LI7 0000 29784

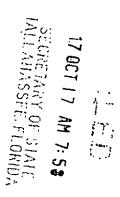
(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	≥ #)
PICK-UP	MAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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10/17/17--81024--030 ++25.00



COVER LETTER

TO: Registration Section Division of Corporations

CR2E079 (2/14)

SUBJECT: ATST-USA. 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:
<u>Karina Petreuko</u>
Haring Petreuko
10275 CO/1/18 AVE # 927
Bal Harbour FL 33154 (City/State and Zip Code)
For further information concerning this matter, please call:
Howing Pegreuko at 786 S56-01-77 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$\sqrt{2}\$\$ \$\sqrt{2}\$\$ \$\sqrt{2}\$\$ 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

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the I	imited liability company as it appears on the records of the Florida Department
of State is:	#IST-USA L.L.C
2. The Florida docu	nent/registration number assigned to this limited liability company is:
L 17	0000L9784
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is:
4. L. Barin	a Petreuko hereby withdraw/resign as a series of Person Resigning)
AW	BR SEEF
(1	Print Title)
	lity company and affirm the limited liability company has been in the liability company has been in the limited liability company has been in the liability company has been
resignation in writ	ing.
(
Signature of Dis.	sociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	S30.00 (Optional)