

L17000143258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

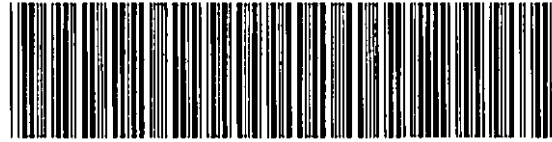
(Business Entity Name)

(Document Number)

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2018 FEB -9 PM 1:25

FEB 12 2018  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AGR Event & Staffing  
(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:

Maria Paredes

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

AGR Event & Staffing

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

6070 W 19<sup>TH</sup> AVE. SUITE 105

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

HIALEAH, FL 33012

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

For further information concerning this matter, please call:

203-770-6991

Maria Paredes

\_\_\_\_\_) at ( \_\_\_\_\_ )  
(Area Code & Daytime Telephone Number) (Name of Contact Person)

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations

Cliftop Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

P.O. Box 6327  
Tallahassee, Florida 32314

CR21E079 (2/14)



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2018 FEB 23 11:25

**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: AGR EVENT & STAFFING LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L17000143258

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 1/22/2018  
Maria Paredes

4. I, \_\_\_\_\_  
hereby withdraw/resign as a  
(Print Name of Person Resigning)

Owner  
(Print Title)

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

Maria Paredes  
Signature of Dissociating Member or Resigning Manager