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PICK-UP	□ w	 AIT 	MAIL
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Certified Copies	_ Cert	ificates of S	Status
Special Instructions to I	Filing Offic	er:	
	Office U	Jse Only	
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## **COVER LETTER**

то:		tration			
	Divisi	on of C	orporations		
SUBJI	ECT:	BAYA	TORRES BEVERAGES	SLLC	
			(Name of Limite	d Liability Con	npany)
The en	closed	membe	r, resignation or dissociati	ion and fee(s	) are submitted for filing.
Please	return	all corr	espondence concerning the	is matter to:	
JUAN	I SAN	TAELL	l A I		
			(Contact Person)		-
PASA	N INV	/ESTM	 ENT, INC		
		<u></u>	(Firm/Company)		-
2310	W WA	TERS	AVE SUITE D		
			(Address)		-
TAME	PA, FL	33604	' 		
			ity/State and Zip Code)		-
For fur	rther in	formati	on concerning this matter,	please call:	
JUAN	I SAN	TAELL	 <del> </del>	813	849-2878
	(Na	ame of C	Contact Person)	- (	& Daytime Telephone Number)
Enclos ■ \$25			a check made payable to t		repartment of State for: Fee & Certified Copy
			R ADDRESS:		MAILING ADDRESS:
_		Section	, ,		Registration Section
		Corporat	ions		Division of Corporations
Cliftor			Cirolo		P.O. Box 6327
			er Circle		Tallahassee, Florida 32314
a antan	assee, l	Florida	02301 		
CR2E07	9 (2/14)				





## 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)

	mited liability company as it appears on the records of the Florida Departme	ent
of State is: BAYA	TORRES BEVERAGES LLC	
	nent/registration number assigned to this limited liability company is:	
L17000223434	·	
] 3. The date this mem	ber/manager withdrew/resigned or will withdraw/resign is:	_
4. I, CARLOS TOR	RES , hereby withdraw/resign as a	
MGRM	ne of Person Resigning)	
- Pi	rint Title)	
of this limited liabi resignation in writi	lity company and affirm the limited liability company has been notified of ning.	ny
Cel	Par	
Signature of Diss	ociating Member or Resigning Manager	