

4/8/2021

Division of Corporations

L1900008871

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H21000140065 3))



H210001400653ABCT

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : TAX ZONE INC.
Account Number : I20190000044
Phone : (407)888-3131
Fax Number : (888)453-0509

2021 APR -8 PM 3:01

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: accountant@taxzone FL.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
AMATOSA INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FLORIDA

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H210001400653

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMATOSA INVESTMENTS 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:

SANTIAGO ANGEL TOBON
(Contact Person)

(Firm/Company)

399 E BURLEIGH BLVD #1081
(Address)

TAVARES, FL 32778
(City/State and Zip Code)

For further information concerning this matter, please call:

SANTIAGO ANGEL TABON at 407 888-3131
(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

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

H210001400653

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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)

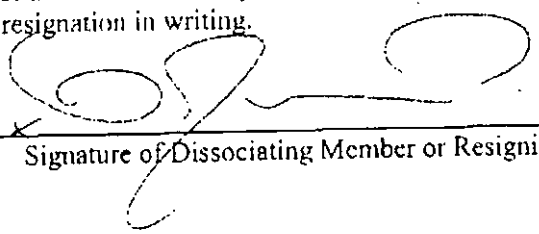
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: AMATOSA INVESTMENT LLC

2. The Florida document/registration number assigned to this limited liability company is:
L19000008871

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 02/01/2021

4. I, JUAN D ANGEL, 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.



Signature of Dissociating Member or Resigning Manager

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

21 APR - 8 AM 2:40
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CORPORATION SERVICES
TALLAHASSEE, FLORIDA

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