

L190000 43008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

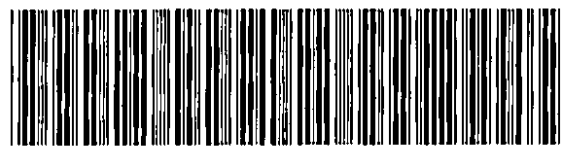
(Business Entity Name)

(Document Number)

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STATE  
20 FEB 14 PM 4:46

Association  
of  
Member

MAR 09 2020  
D CUSHING

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SUNNY CARGO 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:

WHICA BRAVO  
(Contact Person)

SUNNY CARGO LLC  
(Firm/Company)

5670 NW 116TH AVE. APT 218  
(Address)

DORAL/FL 33178  
(City/State and Zip Code)

For further information concerning this matter, please call:

WHICA BRAVO at ( 305 ) 8578150  
(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

2012 FEB 14 PM 4:44  
STATE DEPARTMENT OF STATE  
CORPORATION SERVICES



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: SUNNY CARGO L.L.S.

2. The Florida document/registration number assigned to this limited liability company is: 1.19000043008

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 01/01/2020

4. I, MAIGUALIDA BRAVO, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
MANAGER  
*(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

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
JAN 01 2020

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