

L19 000 265 287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

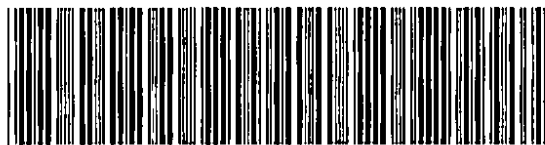
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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Dissociation of member

JAN 11 2020

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BEHBELL WORLDWIDE TRADING 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:

VICENTE ALBERTO BEHRENS BELLO
(Contact Person)

BEHBELL WORLDWIDE TRADING LLC
(Firm/Company)

9900 NW 27TH ST
(Address)

DORAL, FL 33712
(City/State and Zip Code)

For further information concerning this matter, please call:

VICENTE ALBERTO BEHRENS BELLO at (305) 482-3492
(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

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

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DEPARTMENT OF
CORPORATIONS
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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: BEHBELL WORLDWIDE TRADING LLC

2. The Florida document/registration number assigned to this limited liability company is: L19000265287

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 11/18/2019

4. I, MARIA ANDREINA BEHRENS BELLO, 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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 DEC -4 AM 8:25

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