

4/19/2021

Division of Corporations

**L21000091665**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : GFS TAX & ACCOUNTING SERVICES  
Account Number : I20140000089  
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DIVISION OF CORPORATIONS

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

Email Address: INFO@GFSTAXACCT.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
SOAR GLOBAL TECHNOLOGIES LLC**

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**COVER LETTER**

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**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SOAR GLOBAL TECHNOLOGIES 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:

JULIANA MACHADO  
(Contact Person)  
GFS TAX & ACCOUNTING SERVICES  
(Firm/Company)  
11764 W SAMPLE RD STE 102  
(Address)  
CORAL SPRINGS, FL 33065  
(City/State and Zip Code)

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For further information concerning this matter, please call:

JULIANA MACHADO at ( 754 ) 301-2128  
(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

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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: SOAR GLOBAL TECHNOLOGIES LLC
2. The Florida document/registration number assigned to this limited liability company is: L21000091665
3. The date this member/manager withdraw/resigned or will withdraw/resign is: 04/16/2021
4. I, MARCIO SAMPAIO, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*  
AMBR  
*(Print Title)*

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04/16/2021

of this limited liability company and affirms 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)