

10/24/24, 2:20 PM

Division of Corporations

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 : JSD & COMPANY PA
Account Number : I20190000114
Phone : (786)286-2705
Fax Number : (305)901-6024

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

Email Address: jsanchez@jsdandcompany.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
IMPORTAFIM LLC

Certificate of Status	1
Certified Copy	0
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M. SOLOMON

OCT 24 2024

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Help

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: IMPORTAFIM LLC

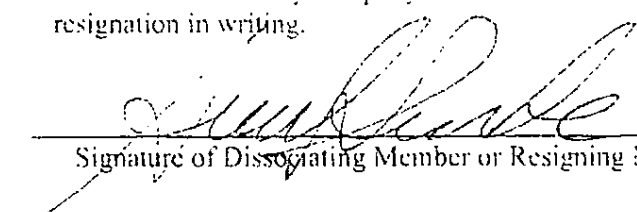
2. The Florida document/registration number assigned to this limited liability company is:
L24000373214

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 10/24/2024

4. I, CARLOS A. IRIARTE, 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)

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SECRETARY OF STATE
TALLAHASSEE, FL