

L130000 12668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

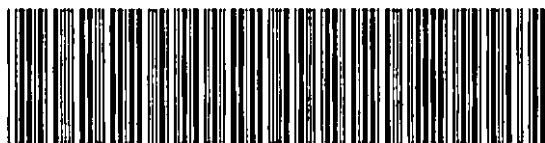
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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09/23/16--01023--026 **25.00

09/23/16 3:00 PM

09/23/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L13000012668

(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:

LUCA D'OTTONE

(Contact Person)

VALENTI GROUP

(Firm/Company)

2000 PONCE DE LEON BOULEVARD #600

(Address)

CORALGABLES, FL. 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

LUCA D'OTTONE

(Name of Contact Person)

305

975-0897

at ()

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 26, 2018

LUCA D'OTTONE
2000 PONCE DE LEON BLVD #600
CORAL GABLES, FL 33134

SUBJECT: VALENTI GROUP, LLC
Ref. Number: L13000012668

We have received your document for VALENTI GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 218A00008644

Call: 1-800-352-7000

218A00008644

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RECEIVED

2018 JUN -8 AM 9:54

DEPARTMENT OF
DIVISION OF CORPORATIONS
TALLAHASSEE, FL



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: FLORIDA

2. The Florida document/registration number assigned to this limited liability company is:
L13000012668

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 09/22/2017

4. I, LUCA D'OTTONE, 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)