L04000021315

Market Care

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SEURETARY OF STATE
ALLAHASSEE, FLORIDA

APPROYEU AND FILED

T. LEWIEUX

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: BAVARIAN AUTO WORL	_D OF FLORIDA,	LLC
	Limited Liability Comp	pany)
The enclosed member, resignation or diss	ociation and fee(s)	are submitted for filing.
Please return all correspondence concerni	ng this matter to:	
Alvaro Castillo B., P.A.		
(Contact Person)		
Castillo & Associates		
(Firm/Company)		
1390 Brickell Avenue, Suite 200		
(Address)		
Miami, Florida 33131		
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
Alvaro Castillo B., P.A.	305	371-5540
(Name of Contact Person)	(Area Code d	Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee		partment of State for: Fee & Certified Copy
		AATING ADDDEGG

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

CR2E079 (2/14)



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)

The name of the limited liability company as it appears on the records of the Florida Department of State is:		
2. The Florida document/registration number assigned to this limited liability company is: L04000021315		
3. The date this member/manager withdrew/resigned or will withdraw/resign is: Nov. 01, 2014		
4. I, ALFREDO E. KANN AGUILAR (Print Name of Person Resigning), hereby withdraw/resign as a		
Manager (Print Title)		
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing. W. Low Kowe. Signature of Dissociating Member or Resigning Manager	14 NOV 21 AM 2: 21	APPRUVEU ANU FILED

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