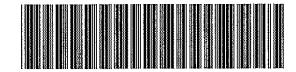
(050000/8758

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	·#)
PICK-UP	☐ WAIT	MAIL
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LOS-18758

COVER LETTER

TO:

TO: Registration Section Division of Corporations	
SUBJECT: ABRAHAM VANLINE MOVE	RS, LLC ad Liability Company)
Dear Sir or Madam:	
Dear Sir or Madam;	
The enclosed Resignation of Member, Managing N	Member or Manager and fee(s) are submitted for filing
Please return all correspondence concerning this m	
Luis Fernando Delgado Cardenas (Name of Person)	SECRETARY OF ALLAHASSEE. F
(Firm/Company)	FLOWER OF
14319 SW 133 CT	<u> </u>
(Address)	
Miami, Fl, 33186 (City/State and Zip Code)	
For further information concerning this matter, plea	ase call:
Luis Fernando Delgado Cardenas a	at (⁷⁸⁶) 2014391
(Name of Person)	(Area Code & Daytime Telephone Number)
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
Enclosed is a check for the following amount:	
\$25 Filing Fee	S55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, Sabas R Gonzalez	, hereby resign as Member			_	
		tle)		_	-:
of ABRAHAM VANLINE MOVERS, LLC		TAC SE	2006		2 -
(Limited Liability a limited liability company organized under the law and affirm that the limited liability company has be	s of the State of Florida	DRE TARK	JUL 25		
(Signature of resigning manager, n	nanaging member or member)	TATE	1: 04		

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314