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L06000016266

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

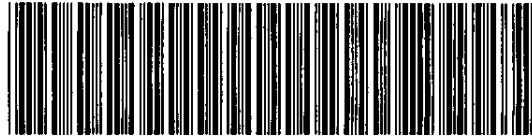
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2014 JAN 27 PM 9:01  
FELAMASSI, JUDITH

B 200100K

JAN 30 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALTIMA INTERNATIONAL GROUP 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:

JESSICA ESPINOSA

(Contact Person)

ALTIMA INTERNATIONAL GROUP LLC

(Firm/Company)

1216 PLACETAS AVENUE

(Address)

CORAL GABLES, FL 33146

(City/State and Zip Code)

For further information concerning this matter, please call:

JESSICA ESPINOSA

(Name of Contact Person)

at ( 305 ) 301-1609

(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

FILED  
JUL 27 PM 9:01  
10-6-14



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OR DISSOCIATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

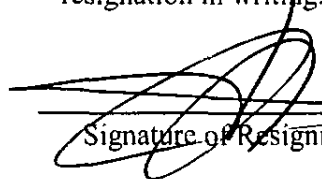
1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ALTIMA INTERNATIONAL GROUP LLCL

2. The Florida document/registration number of this limited liability company is:  
L06000016266

3. The date this member withdrew or will withdraw is: DECEMBER 1, 2013

4. I, JORGE ABREU, hereby resign as a MGR  
*(Print Name of Person Resigning)* *(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Resigning or Dissociating Manager, Member

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

2014 JAN 27 PM 9:01  
TALLAHASSEE, FLORIDA