## L06000 01 01367

(F	Requestor's Name)
(2	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
1)	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	to Filing Officer:
	Office Use Only



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10/31/14--01007--010 \*\*25.00



Blomsm Mally

## **COVER LETTER**

TO: Registration Section Division of Corporations	•
SUBJECT: 1027 HOLDING (Name of Limited	40, UC Liability Company)
The enclosed member, resignation or dissociatio	n and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to:
RAFAEL DIAZ (Contact Person)	
(Firm/Company)  3850 BIRD RD #600  (Address)	
MIAMI TO 33144 (City/State and Zip Code)	
For further information concerning this matter, p	lease call:
RAFAEL DIAZ at (Name of Contact Person)	(305) 345964 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$\formu{7}\$\$ \$25 Filing Fee	e Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

2661 Executive Center Circle

Tallahassee, Florida 32301



November 12, 2014

RAFAEL DIAZ 3850 BIRD RD #600 MIAMI, FL 33146

SUBJECT: 1027 HOLDINGS, LLC Ref. Number: L06000101367

We have received your document for 1027 HOLDINGS, 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 214A00024081

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## 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 l	imited liability company as it appears on the records of the Florida Department
of State is:	1027 HOLDINGS UC
2. The Florida docur	ment/registration number assigned to this limited liability company is:
<u> </u>	06000101367
3. The date this men	nber/manager withdrew/resigned or will withdraw/resign is:
4. I, FAUSTO (Print Na	CAWAA, hereby withdraw/resign as a une of Person Resigning)
_ MANAG	ING HEUBER. Prini Title)
of this limited liab	bility company and affirm the limited liability company has been notified of my ting.
- Jen	Mu
Signature of Dis	ssociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)