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## **COVER LETTER**

TO:

CR2E079 (2/14)

Registration Section

Division of Corporations INTERNATIONAL PRESTIGE ASSOCIATES, LLC SUBJECT: (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: CAROLYN KAHL (Contact Person) ROCA GONZALEZ P.A. (Firm/Company) 3370 MARY STREET (Address) MIAMI, FLORIDA 33133 (City/State and Zip Code) For further information concerning this matter, please call: CAROLYN KAHL (Name of Contact Person) (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: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301



## 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:	TERNATIONAL PRESTIG	E ASSOCIATES, LLC	17	
2. The Florida do L080000022	1 -	assigned to this limited liability comp	any is:	
3. The date this n	nember/manager withdrew/re	JU esigned or will withdraw/resign is:	NE 15 2018	
4. I, ROMINA S	AAIED	, hereby withdraw/resign as a	• •	
(Print	Name of Person Resigning)	,,		
MANAGER		,		
	(Print Title)			
of this limited I resignation in v	1	the limited liability company has been	notified of my	
- Signature of	Dissociating Member or Resi	igning Manager		
Filing Fee:-	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			