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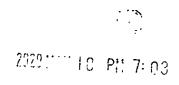
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JUN - 5 2020

COVER LETTER

TO: Registration Division of	Section Corporations		•	
SUBJECT: E&M (Group LLC	· · · · · ·		
	(Name of	Limited Lia	ibility Cor	npany)
The enclosed members	ber, resignation or diss	sociation	and fee(s	s) are submitted for filing.
Please return all co	rrespondence concerni	ng this m	atter to:	
Eduardo Berrocal				
	(Contact Person)	_		_
E&M Group LLC				
-	(Firm/Company)		-	_
3705 NW 115th Ave. 5	Suite 1			
	(Address)			_
Doral, FL.33178				
	(City/State and Zip Code)	_		_
For further informa	ation concerning this n	natter, ple	ase call:	
Eduardo Berrocal		,	05	594-2222
(Name of	Contact Person)			& Daytime Telephone Number)
Enclosed please fin	nd a check made pavab	le to the	Florida I	Department of State for:
■ \$25 Filing Fee				g Fee & Certified Copy
Mailing Addr				Street Address:
Registration				Registration Section Division of Corporations
P.O. Box 63	Corporations			The Centre of Tallahassee
Tallahassee, FL 32314				2415 N. Monroe Street, Suite 810
i ananassee	,			Tallahassee, FL 32303





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)

	e limited liability company as it appears on the records of the Florida Department Group LLC
	ument/registration number assigned to this limited liability company is:
L09000012972	
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is:
Marta Berrocal	hereby withdraw/resign as a
(Print)	, hereby withdraw/resign as a Name of Person Resigning)
Manager	
	(Print Title)
of this limited lia resignation in w	ability company and affirm the limited liability company has been notified of my riting.
Cyfa	To Benoral issociating Member or Resigning Manager
Signature of D	issociating Member or Resigning Manager
_	\$25.00 (Required)
Certified Conv	\$30.00 (Ontional)